

# Motion Correction in Structural and Diffusion MRI: How has it and how could it help?

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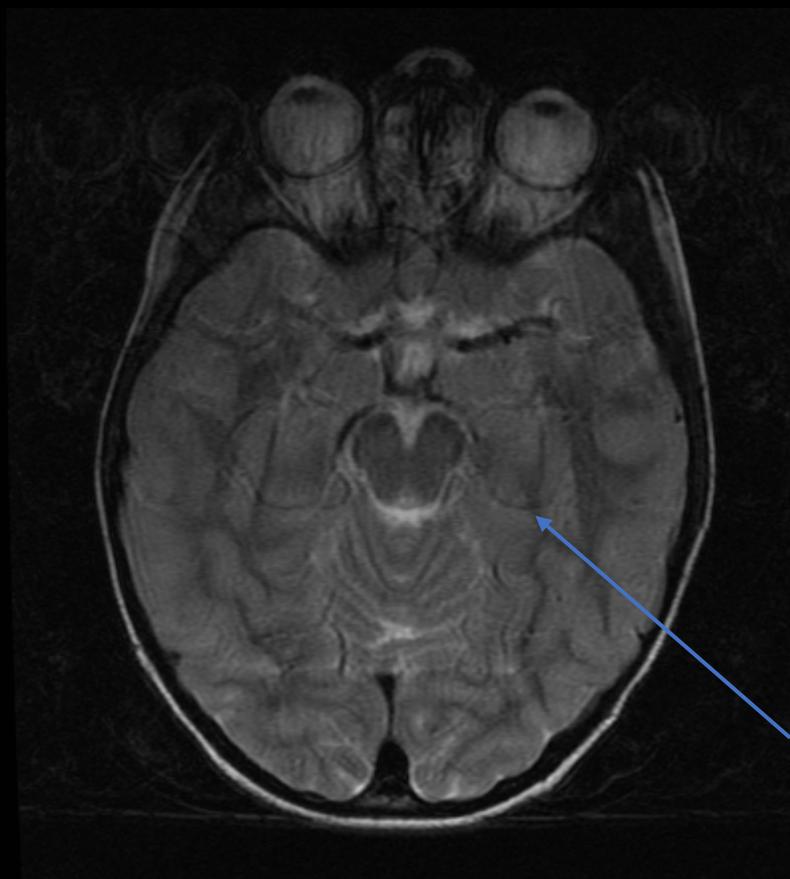
# Goals

- Why is motion a problem for MR imaging of the brain? (focus on research imaging vs. clinical)
- What are the characteristics of motion artifacts in MR acquisitions commonly used in research studies?
- How does motion impact extracted parameters?
- What types of motion correction techniques are available?
- How have they helped MR imaging?
- How could they help MR imaging?

# Why is motion a problem?

- Research imaging involves analysis of images with software
  - Extracting values (e.g. cortical thickness)
  - Calculating quantitative parameters (e.g. mean diffusivity)
  - Determining group differences
- Research imaging exams are long
  - Small voxels desired
  - Multiple volumes for calculating quantitative parameters
- Research imaging is restricted in use of sedation.

# Man vs. Machine

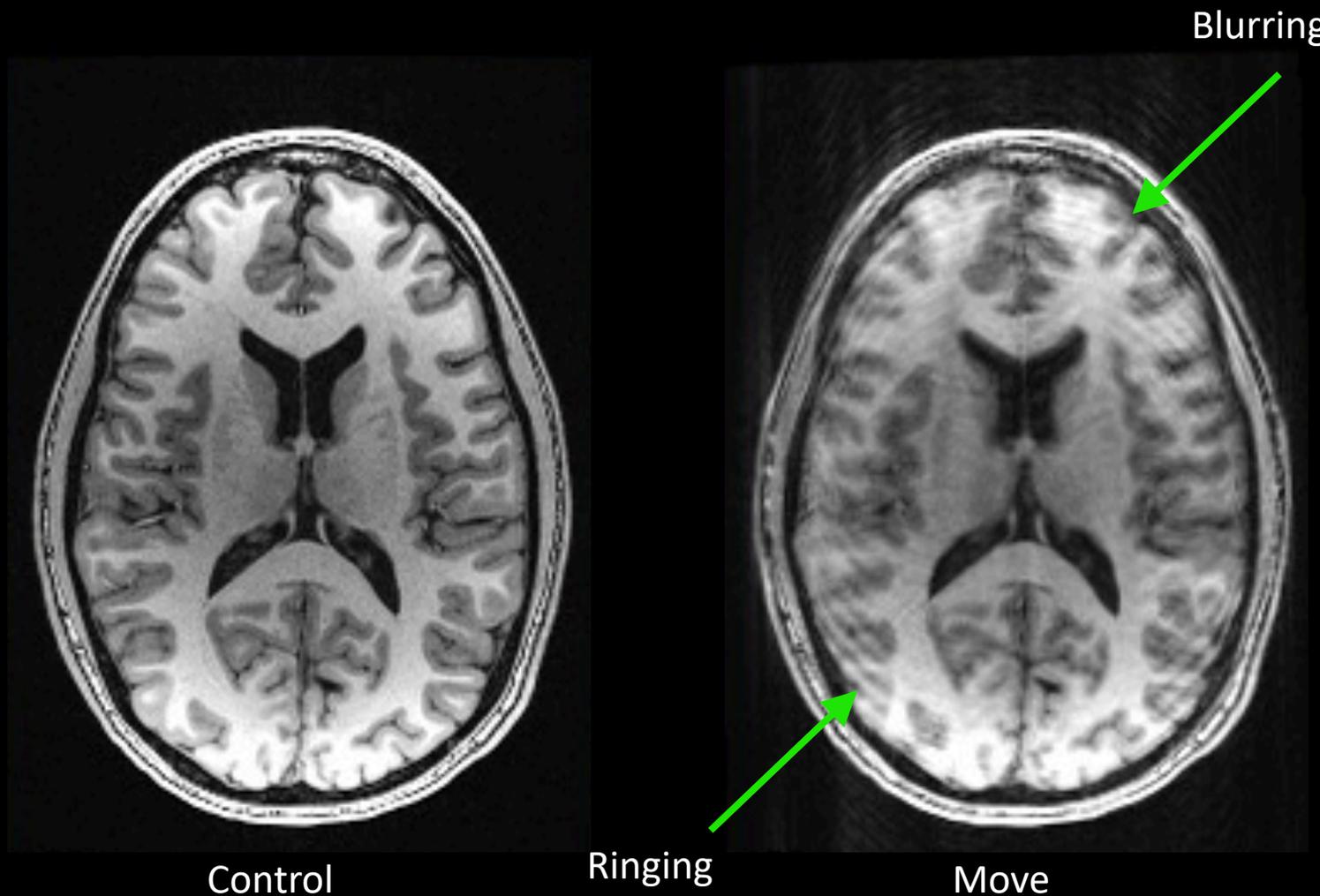


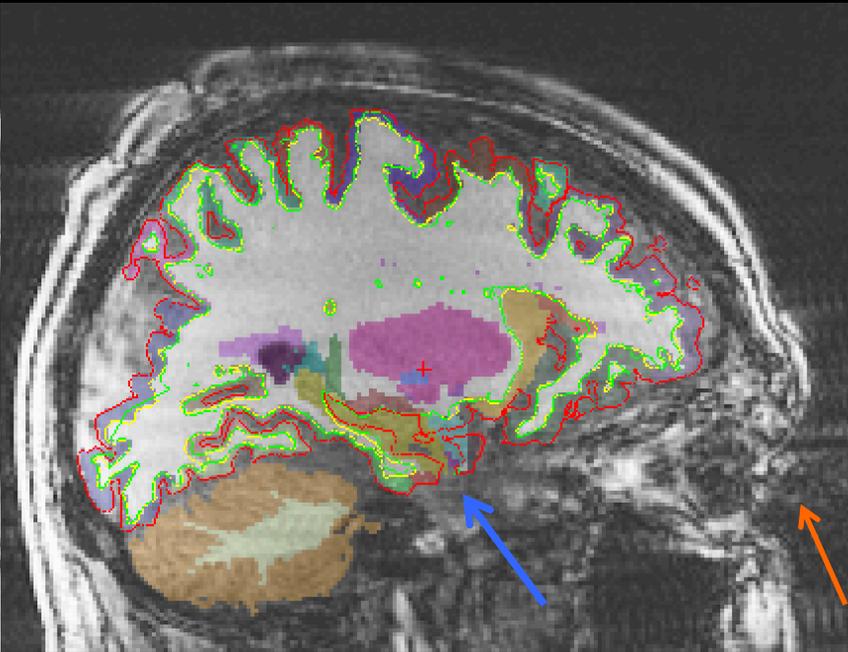
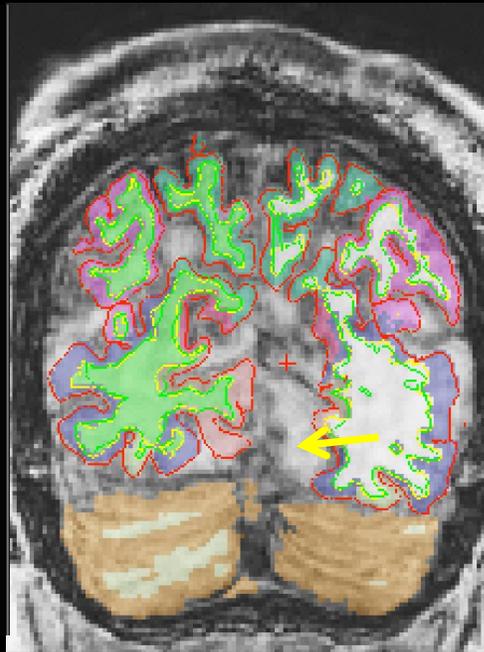
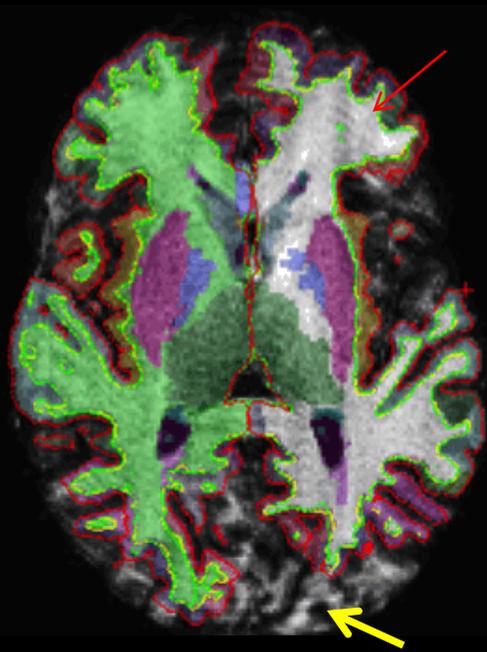
# Structural Imaging

## Why is motion a problem?

- Morphometry studies typically utilize T1-weighted MRI (MPRAGE or FLASH)
  - High resolution (more precise measure)
    - Long scan times
  - 3D (for greater SNR)
    - All the k-space data is used to reconstruct every voxel
- Morphometry measures are based on automated tissue segmentation
  - Requires high gray/white matter contrast needed and sharp boundaries

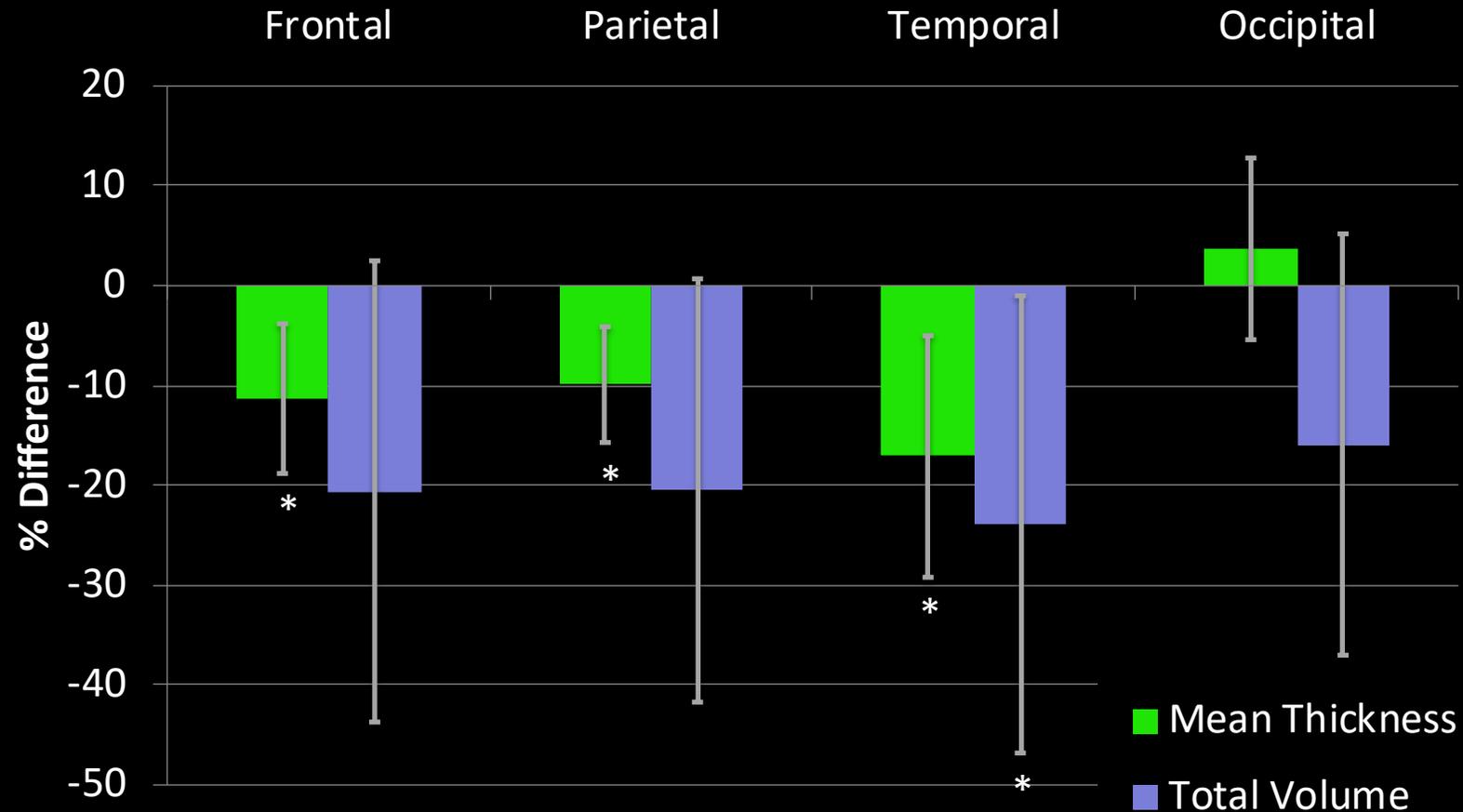
# What does motion look like?



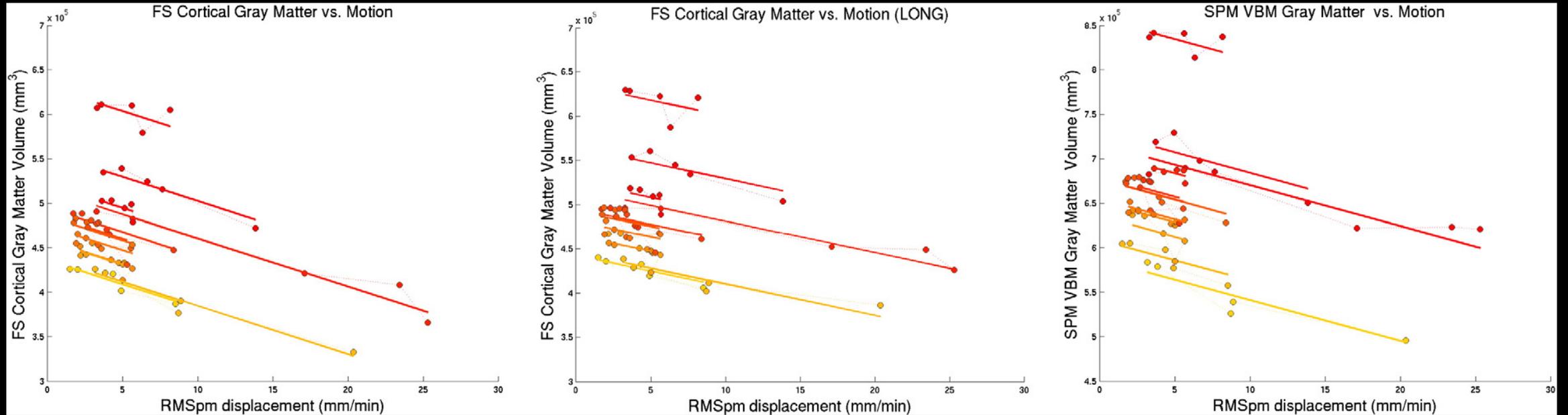


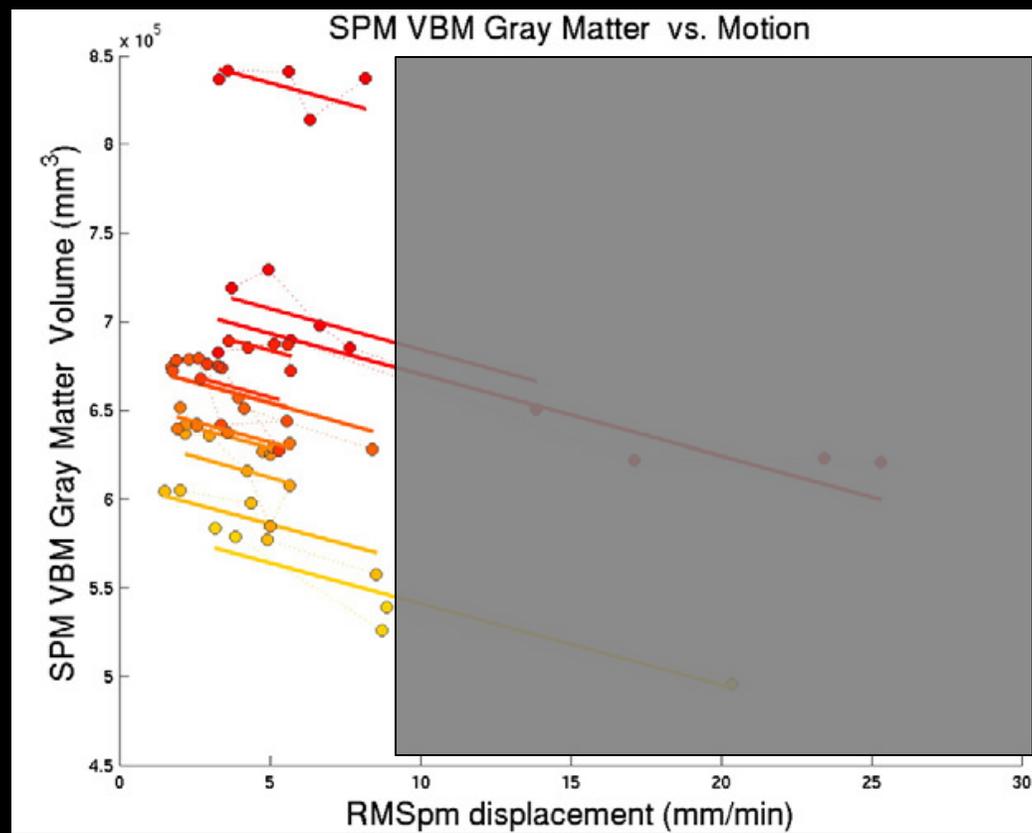
# How does motion impact results?

ACCURACY – Cortical measures

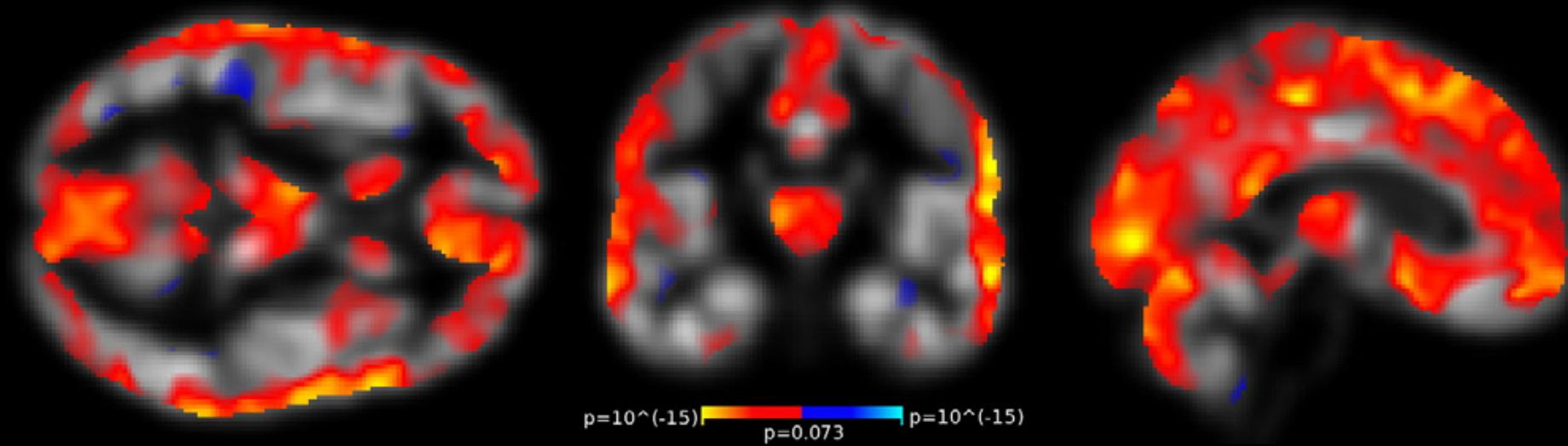


# Correlation – Cortical Volume

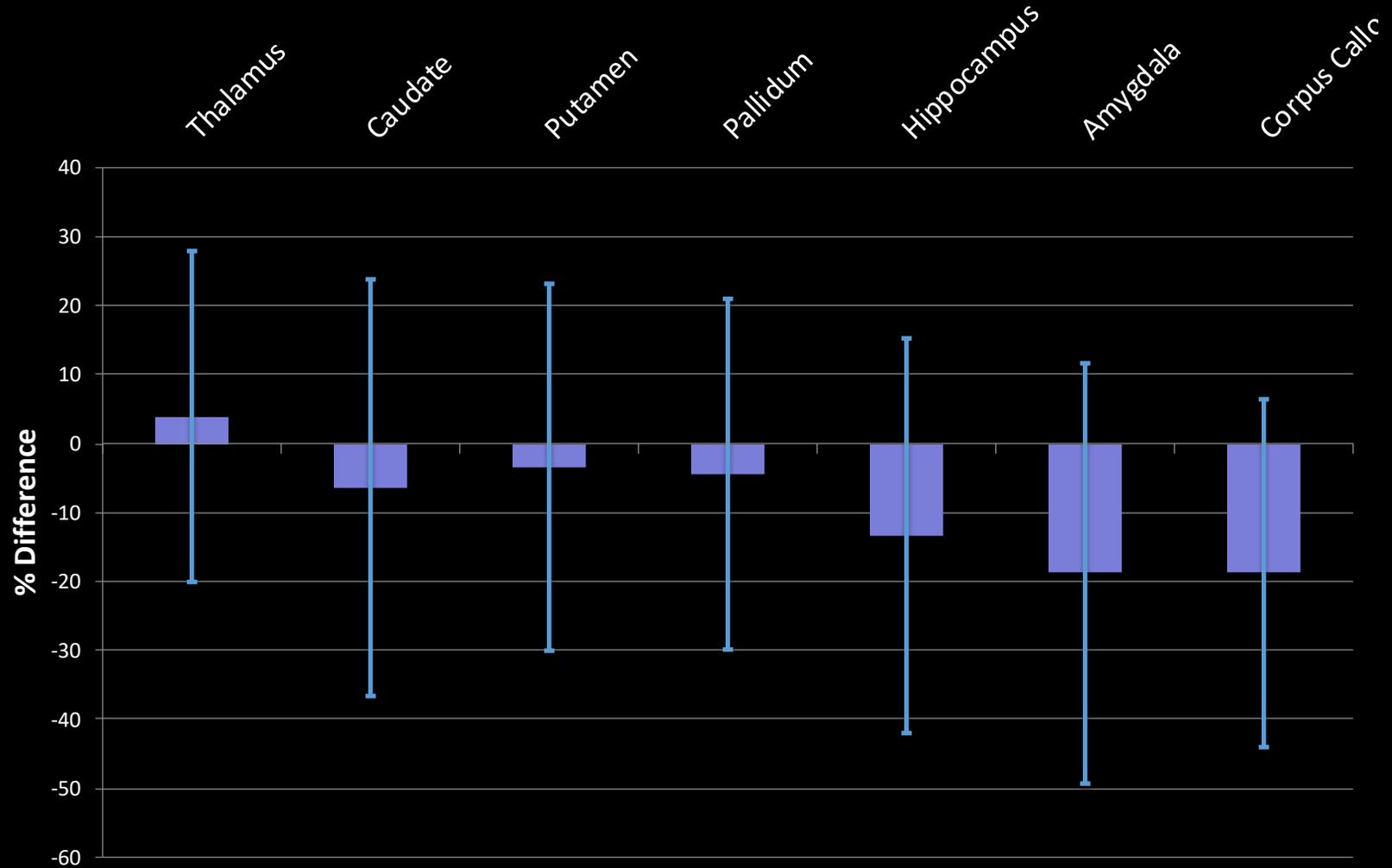




Correlation remains after standard QC

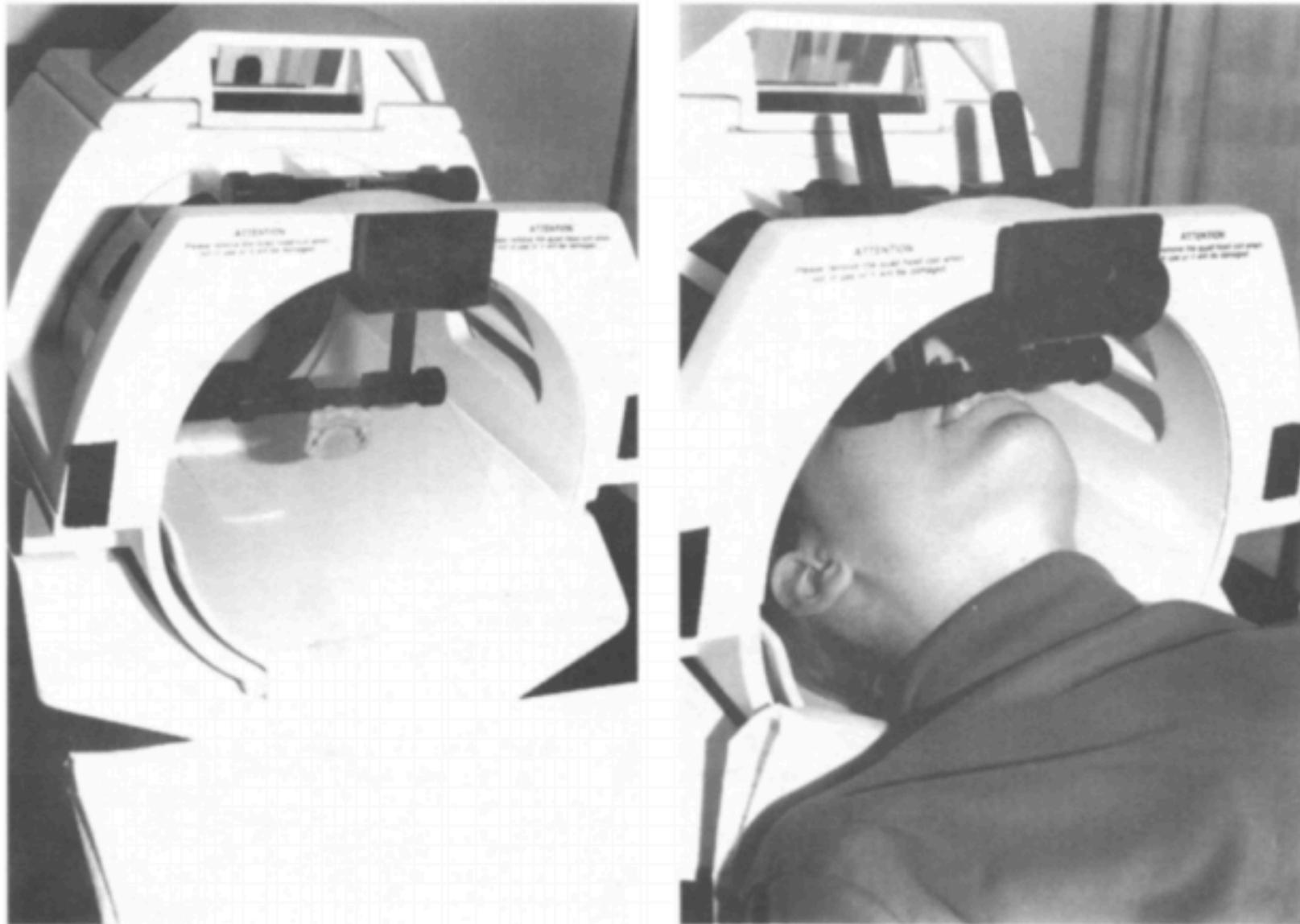


# ACCURACY – Subcortical



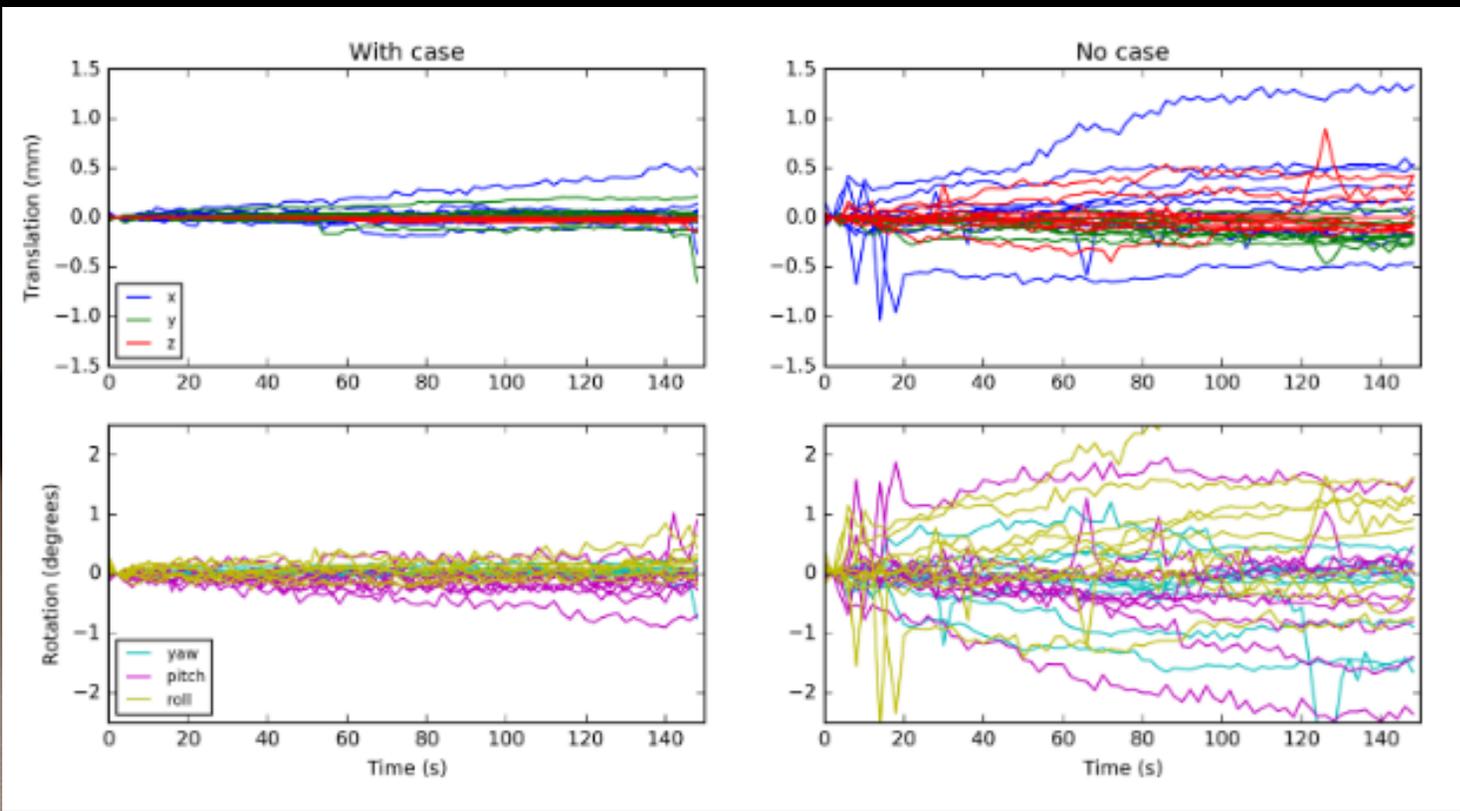
# Motion Correction Techniques

- Physically Restricting
  - Bite bar
  - Headcase



**Figure 4. Left: The bite-bar holder clamped to the head coil. The bite bar with the subject's dental impression is attached to the frame of the holder with the two slotted mounting bars. Right: View of a subject biting on bar in the head coil.**

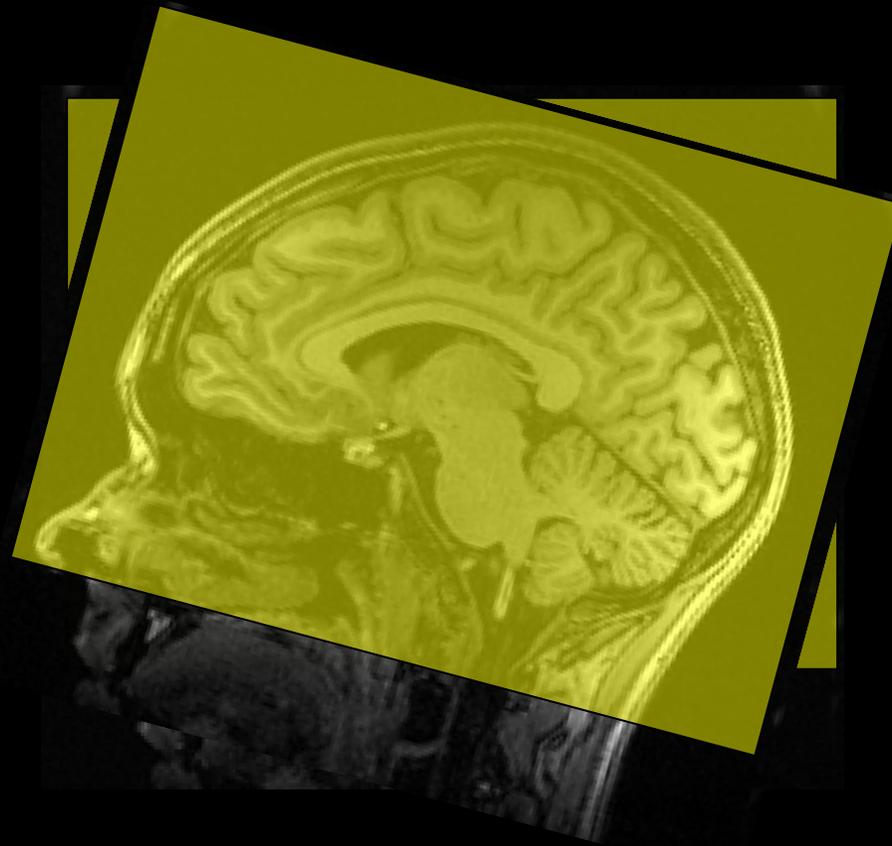
# Caseforge



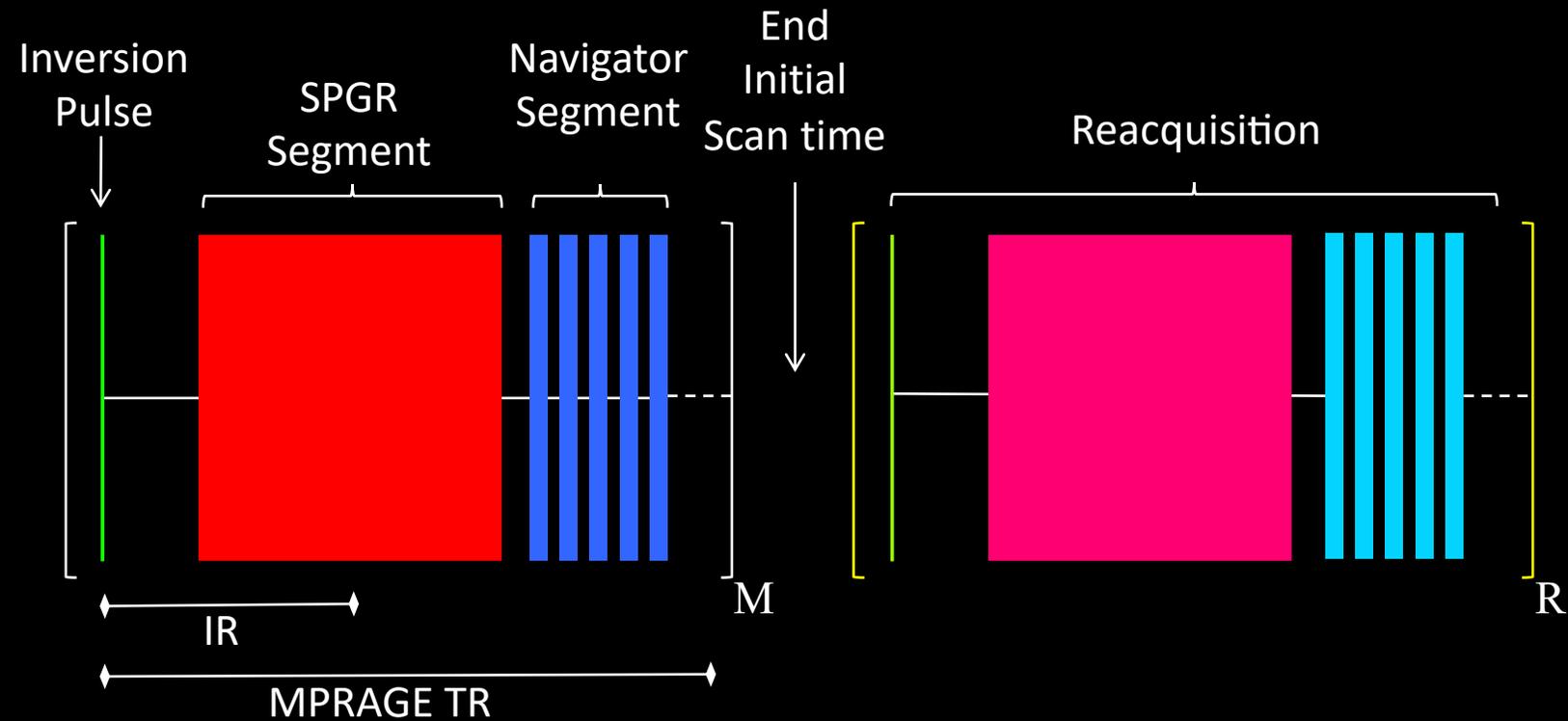
# Motion Correction Techniques

- Physically Restricting
  - Bite bar
  - Headcase
- Prospective Motion Correction
  - MRI Navigators
  - Optical tracking

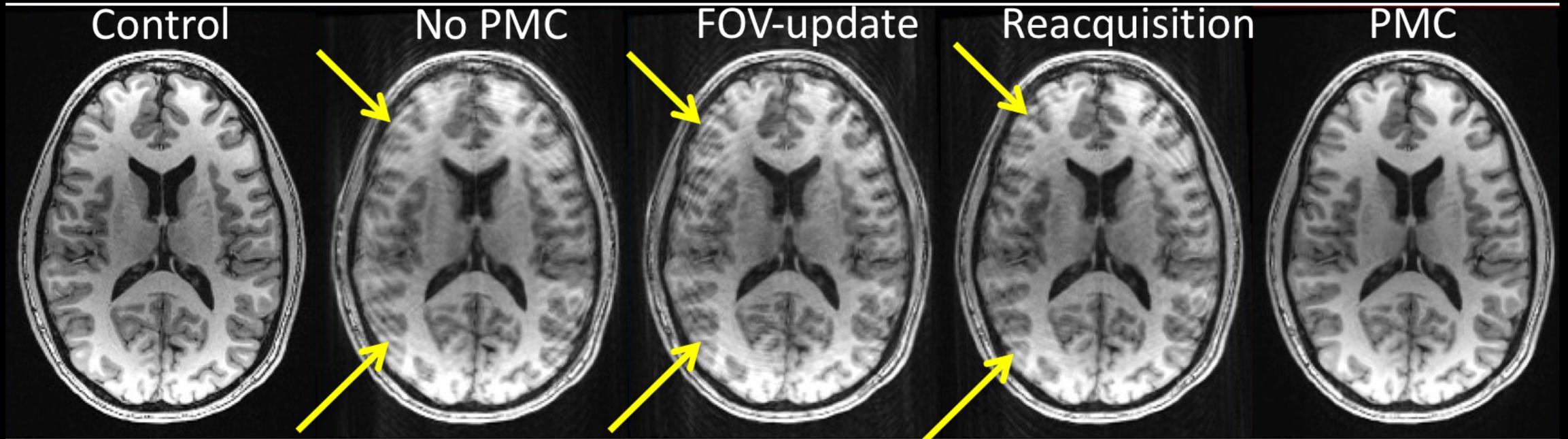
# Prospective Motion Correction



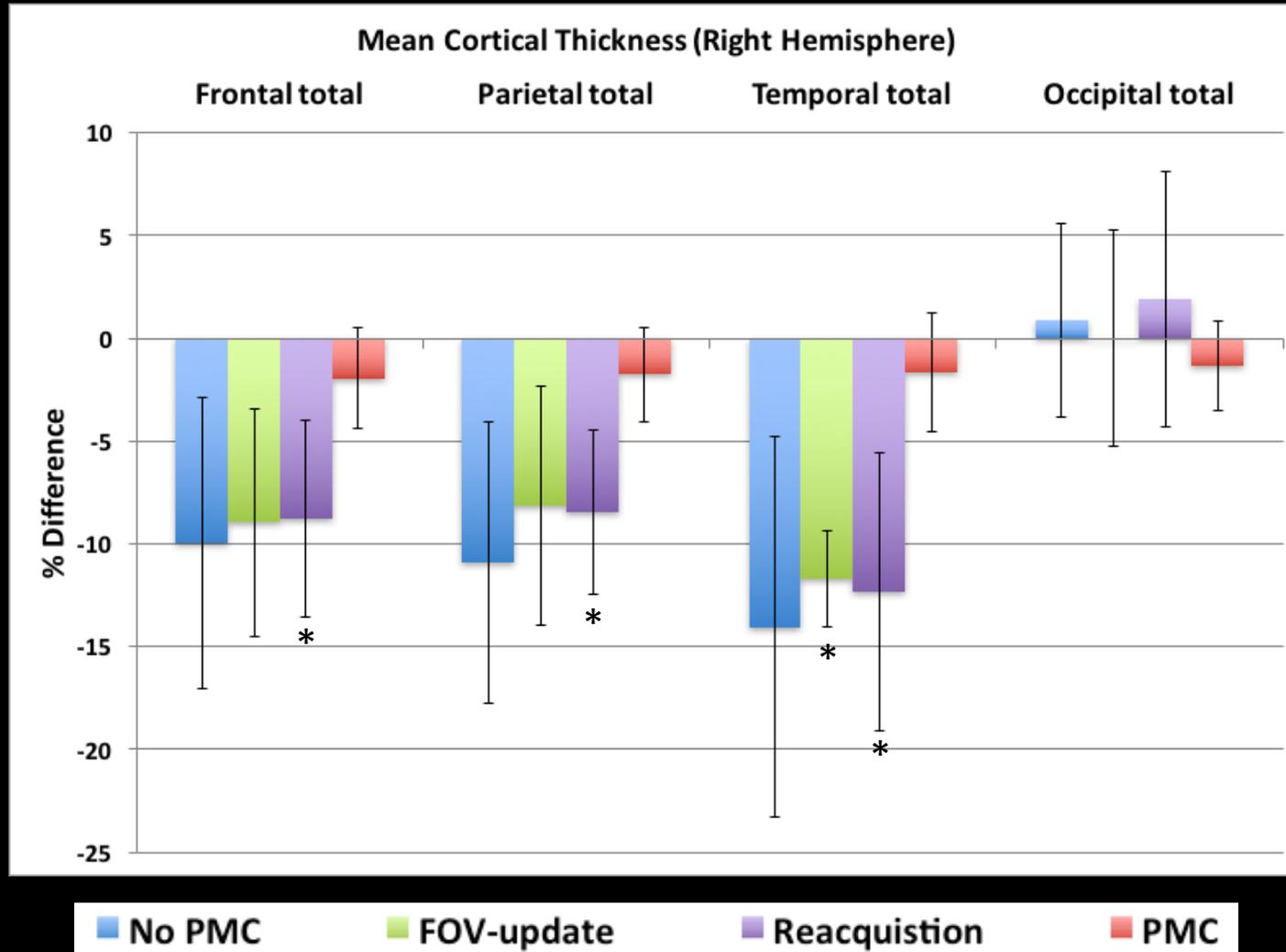
# Prospective Motion Correction - Navigators



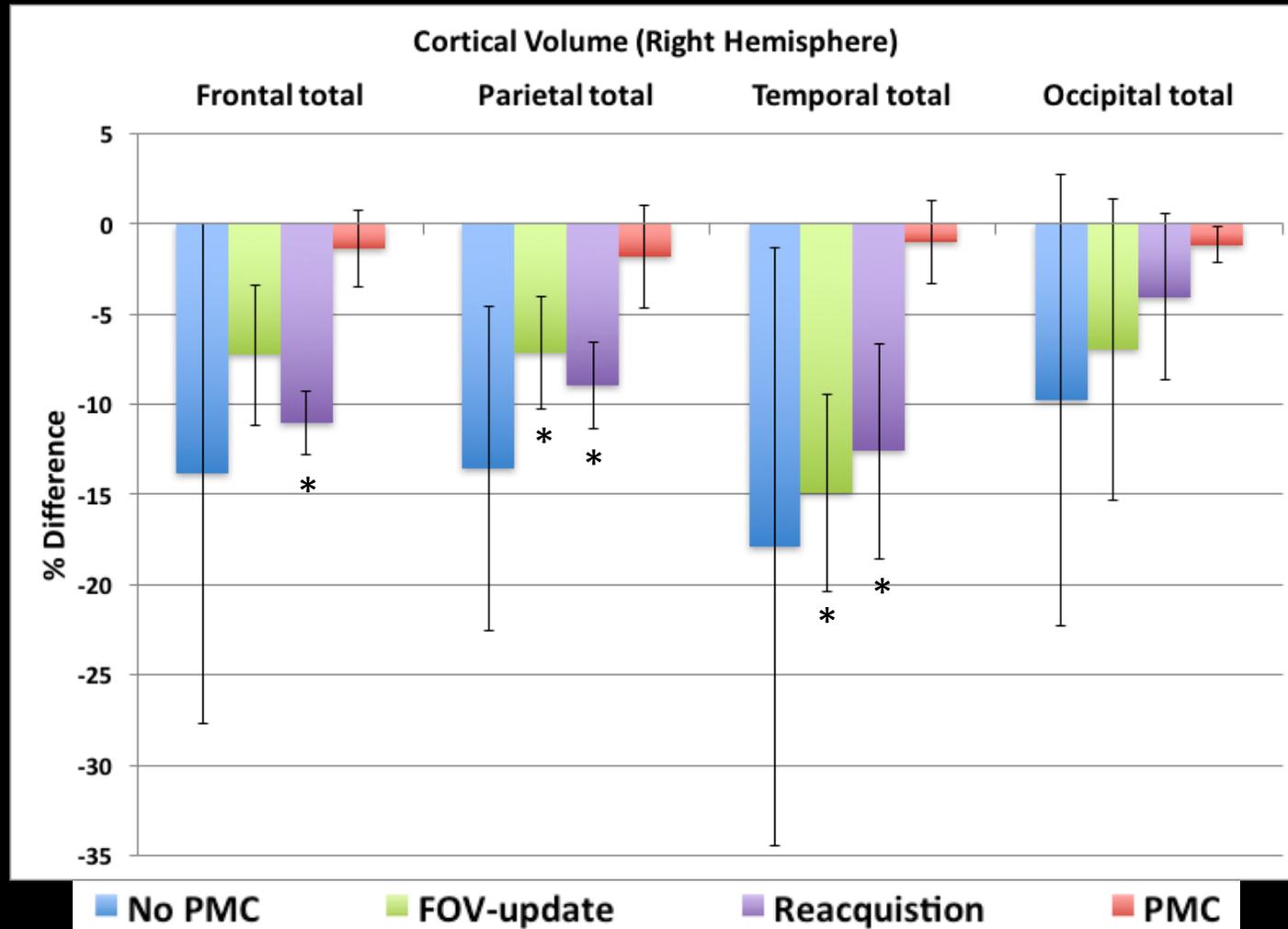
# Prospective Motion Correction (PMC)



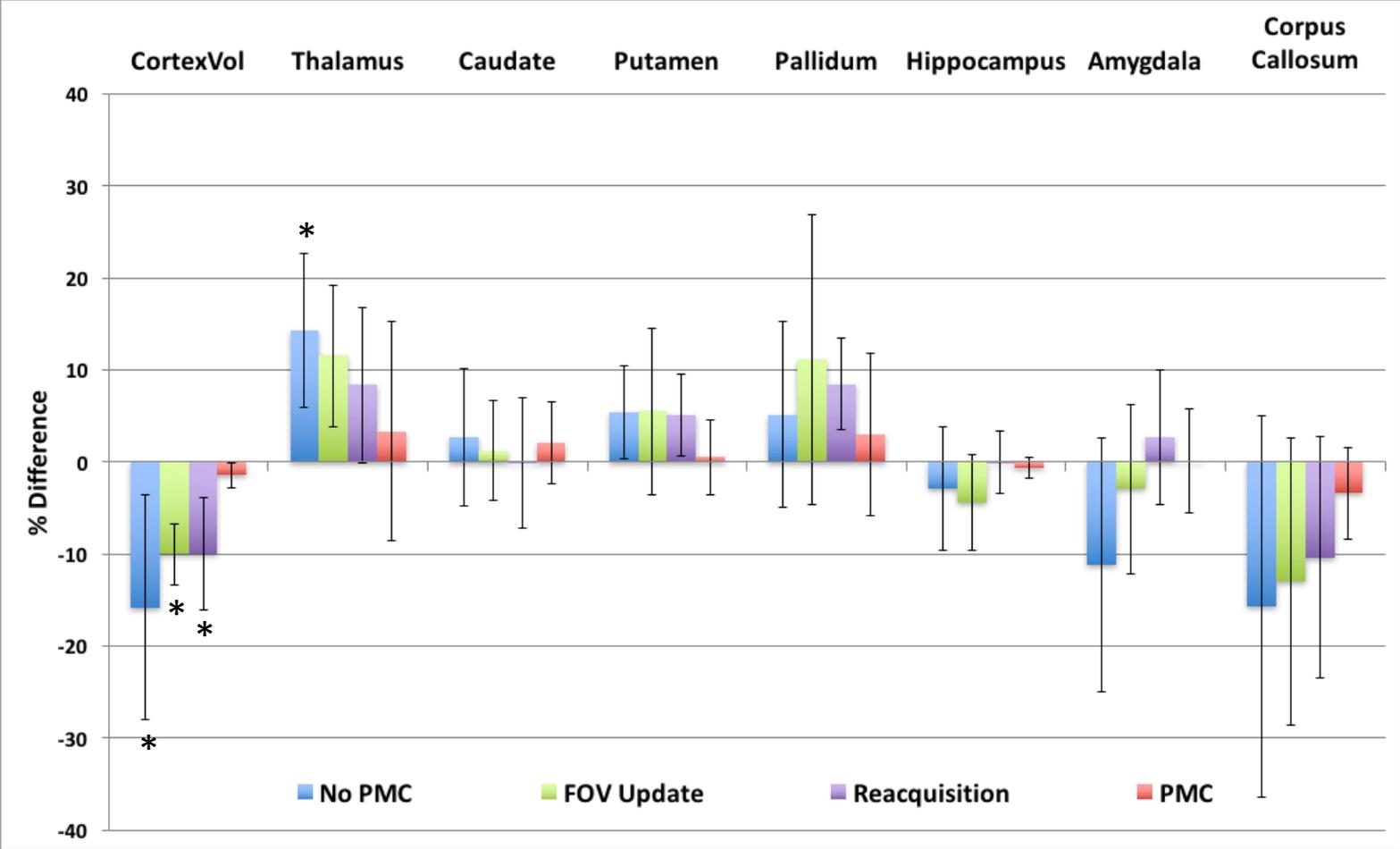
## ACCURACY – Cortical thickness

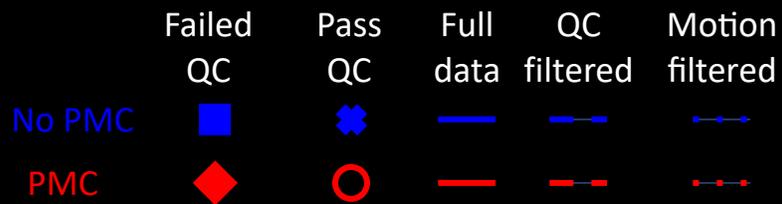
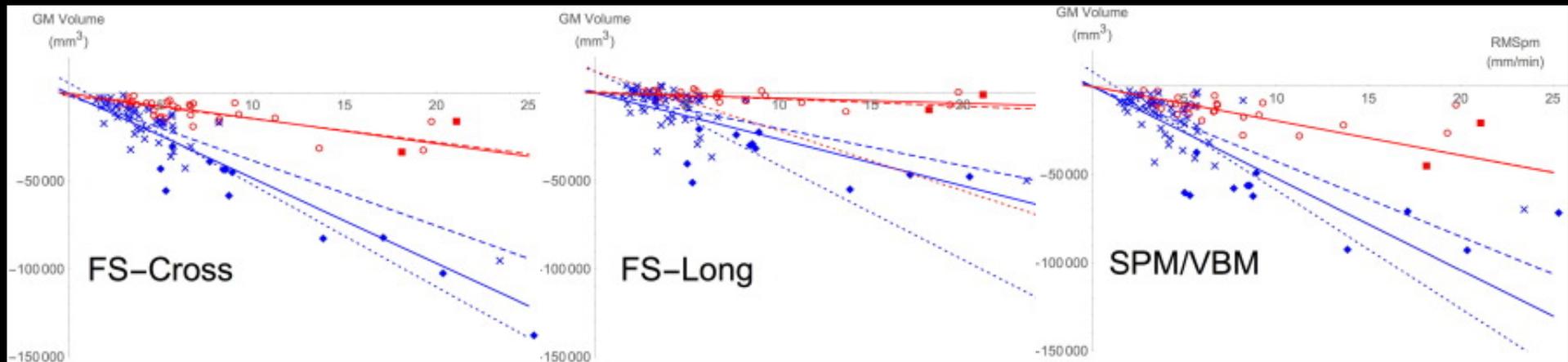


# ACCURACY – Cortical volume



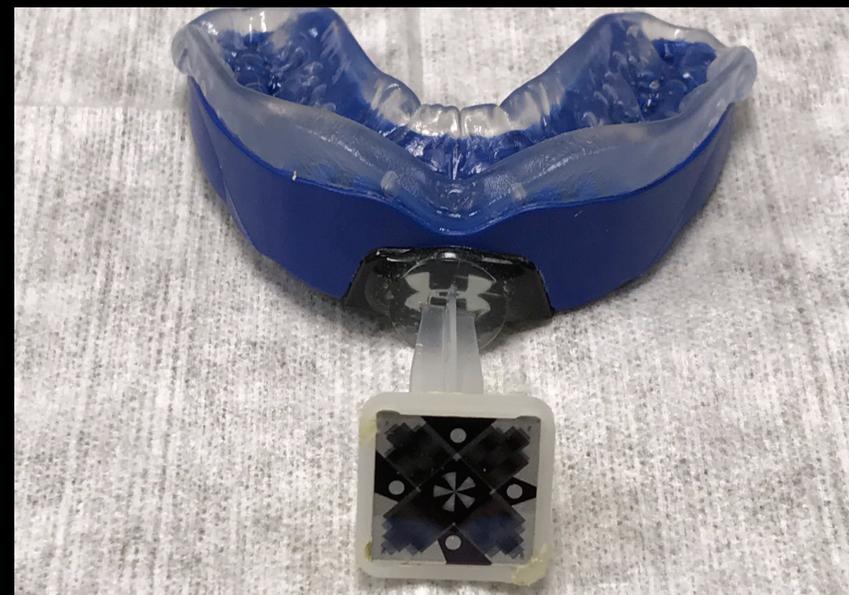
# ACCURACY – Subcortical volume

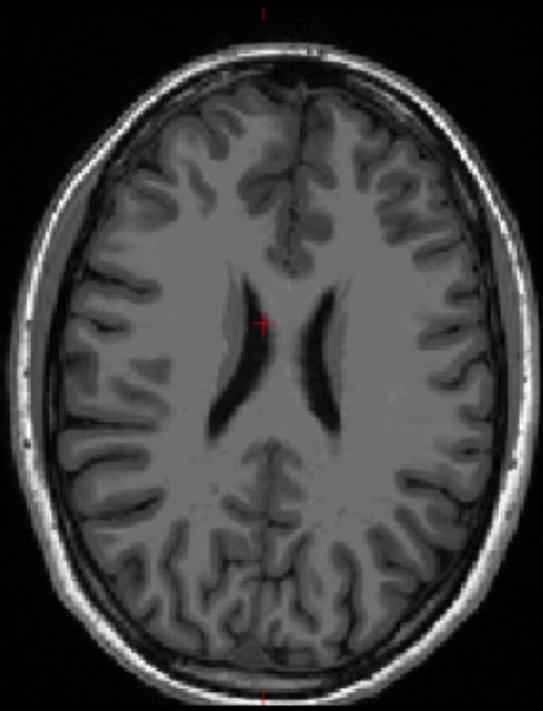




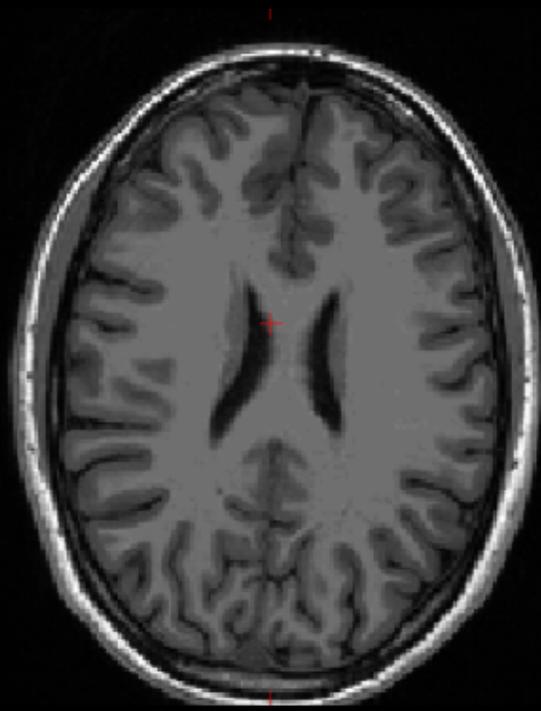
# Prospective Motion Correction - Optical

- Camera mounted in the bore with processing unit
- Marker on subject that's visible by camera
- Motion parameters generated by camera system are captured by scanner and used to update the FOV before acquisition of each k-space line
- Real-time updates with  $\sim 20$  ms lag time

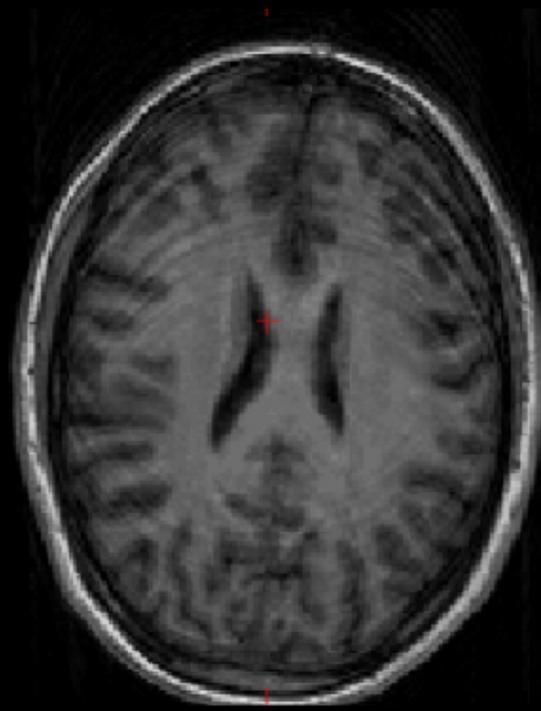




No Move, No PMC  
(Control)



No Move, PMC

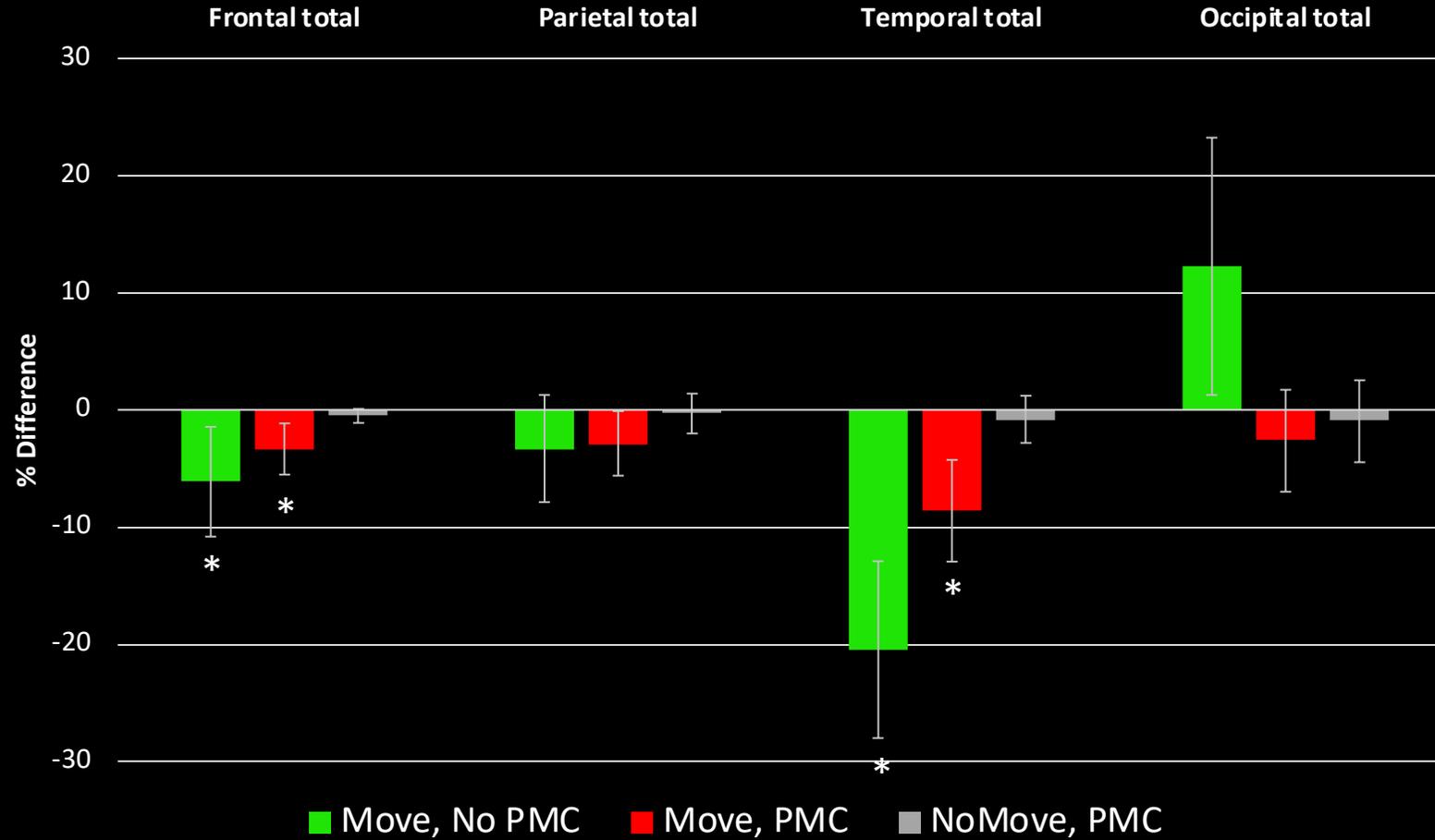


Move, No PMC

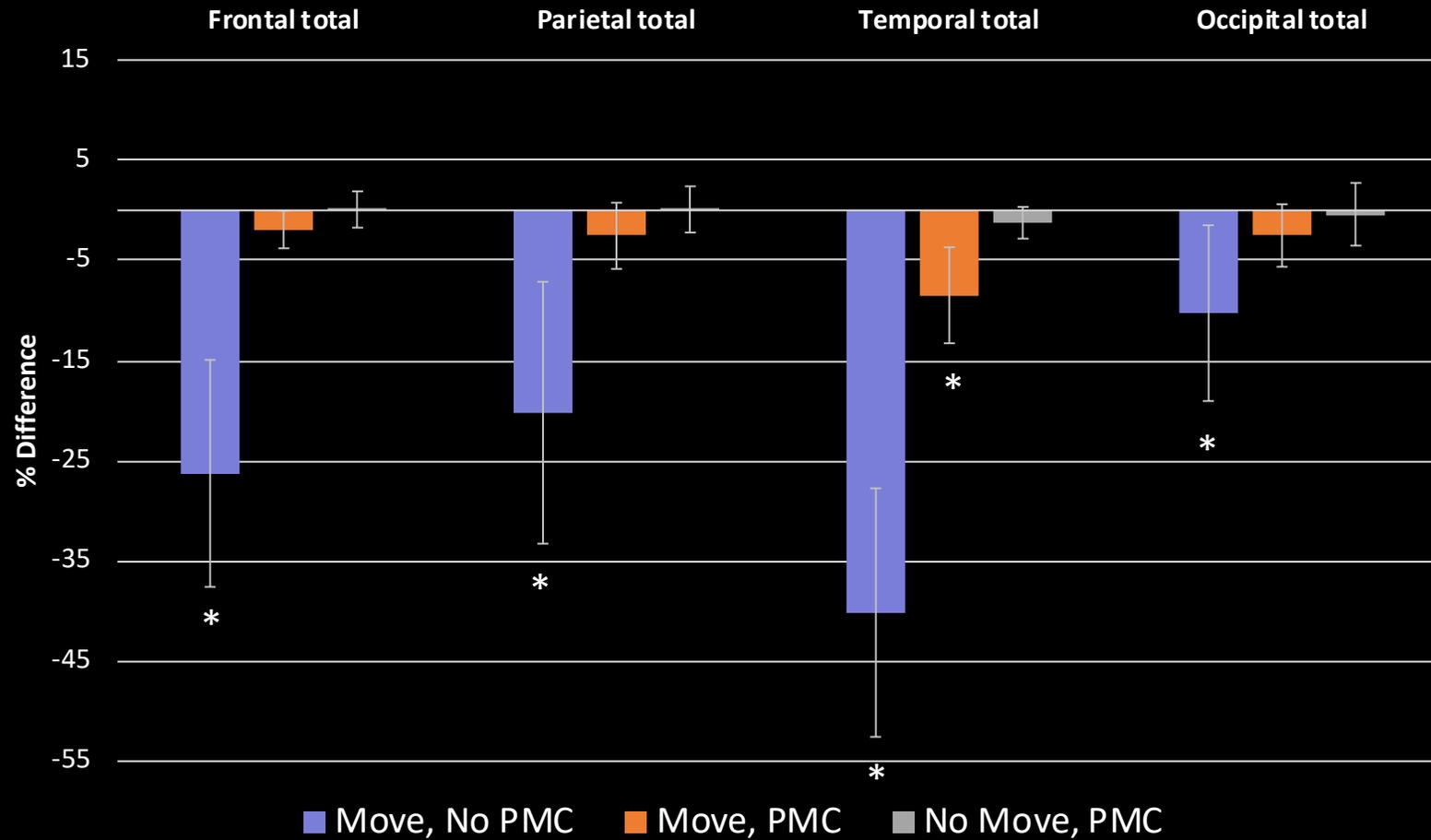


Move, PMC

# ACCURACY – Cortical Thickness



# ACCURACY – Cortical volume



# Ultra High-resolution Structural Imaging

- Very long scan times, up to hours
- Requires PMC, even for cooperative subjects
- Movement from breathing greater than voxel dimensions
- Movements are slow
- Cannot be navigator based
  - Temporal resolution too low
  - Long readouts require updates per k-space line

# 0.6 mm MPRAGE at 3T in 33 minutes



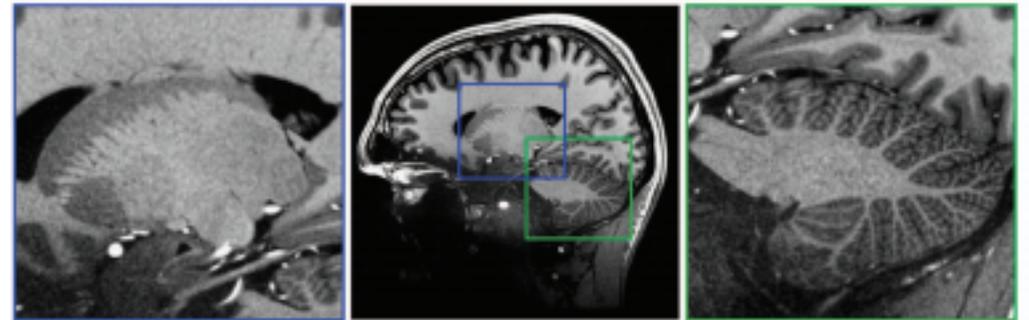
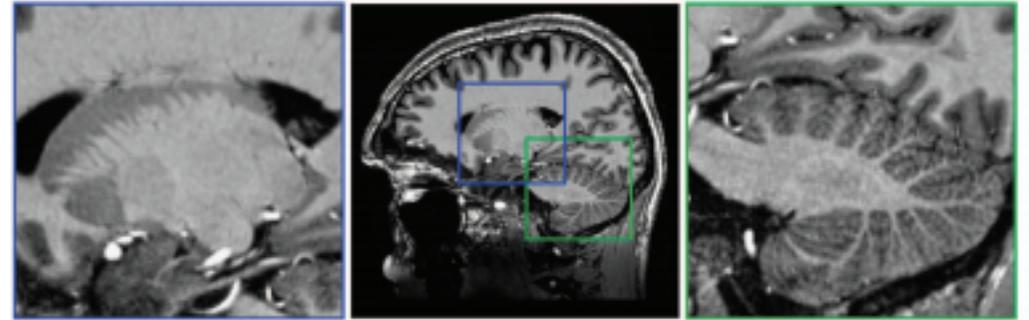
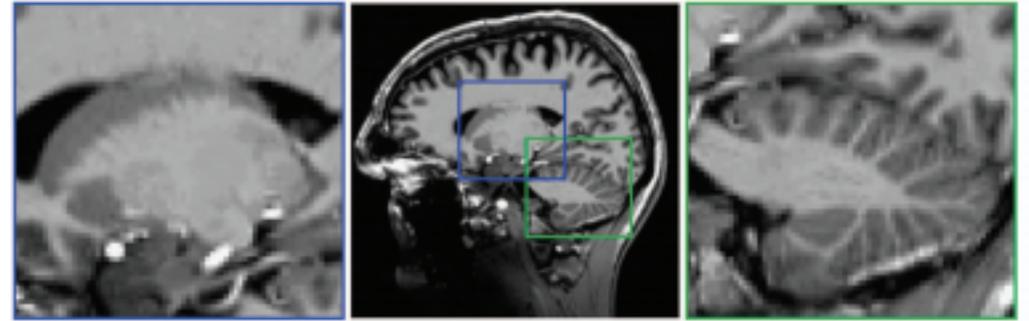
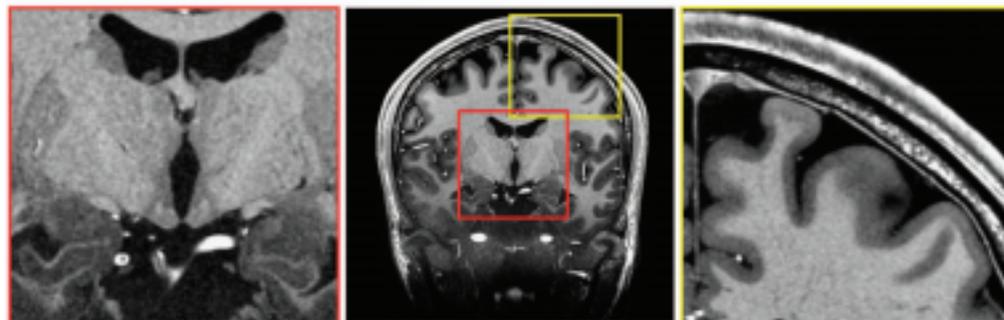
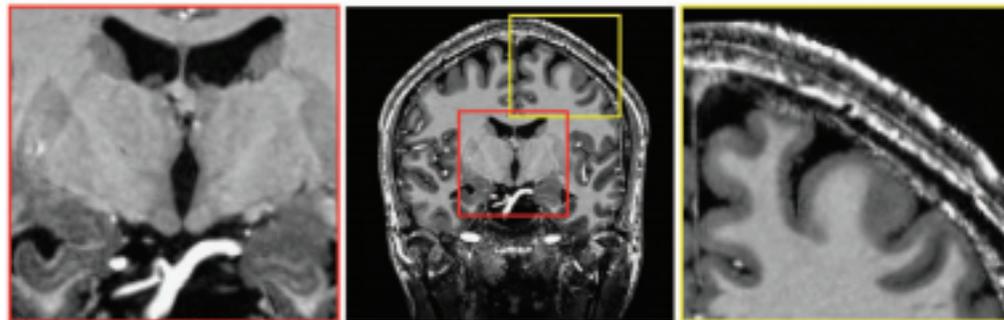
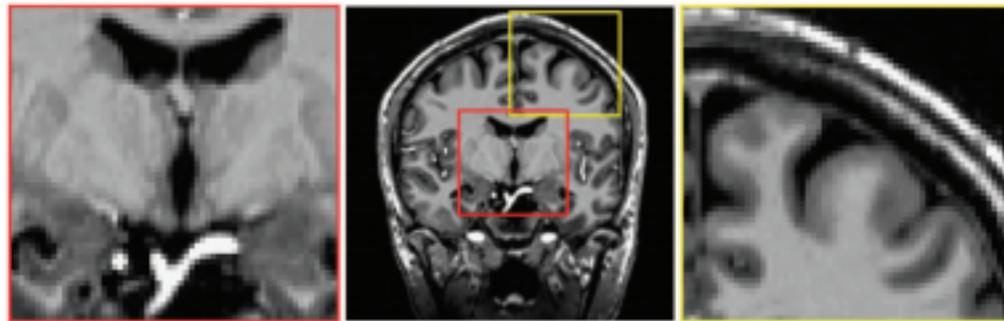
No PMC



PMC

# 0.25 mm MPRAGE at 7T in 7 hours

[www.nature.com/scientificdata](http://www.nature.com/scientificdata)

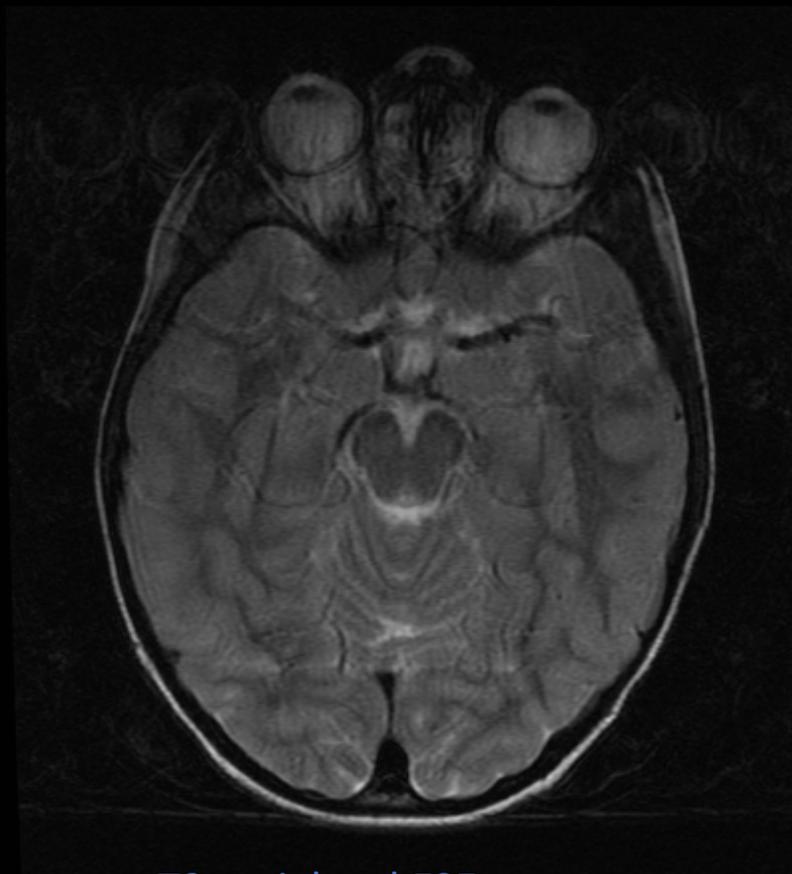


# Diffusion-weighted Imaging

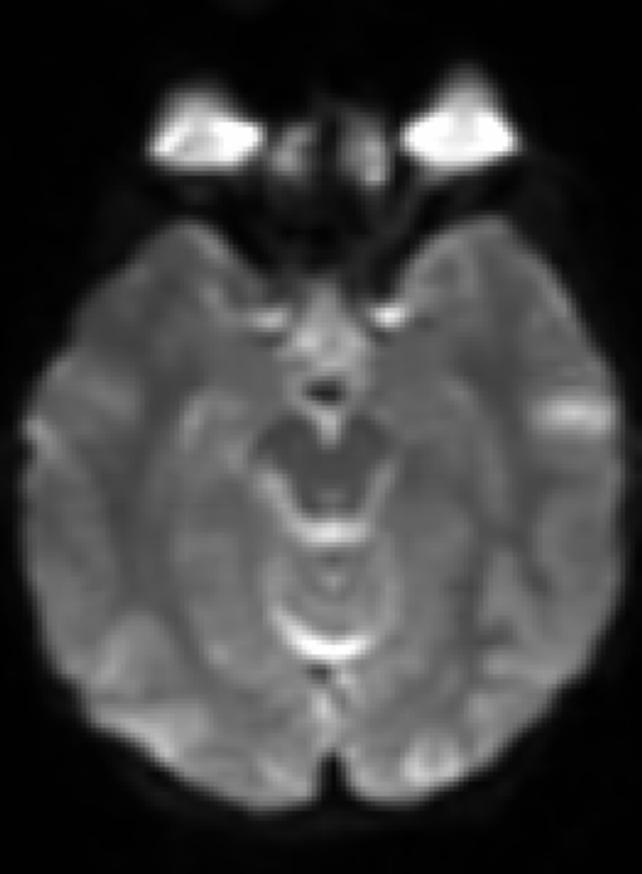
## Why is motion a problem?

- DWI contrast comes from microscopic random motion of water
  - Sensitive to macroscopic motion
  - Measured as change in intensity
- Utilizes large amplitude and long duration diffusion gradients
  - Head rotation induces additional gradient moment
- Multiple volumes required
  - Long scan times

# Single-Shot EPI

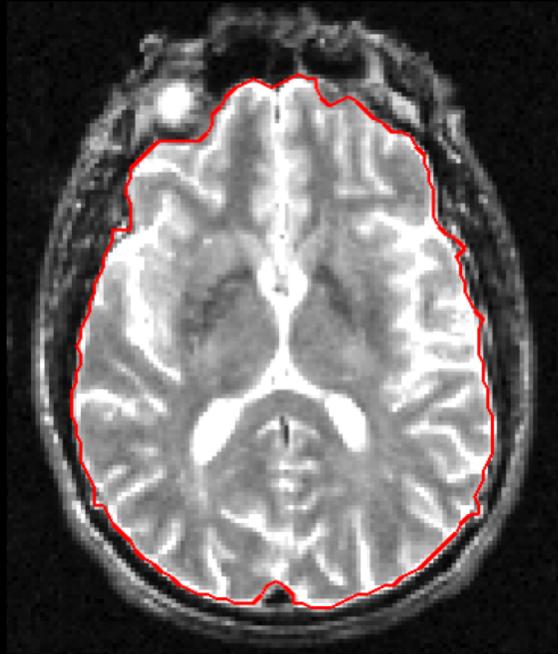


T2-weighted FSE

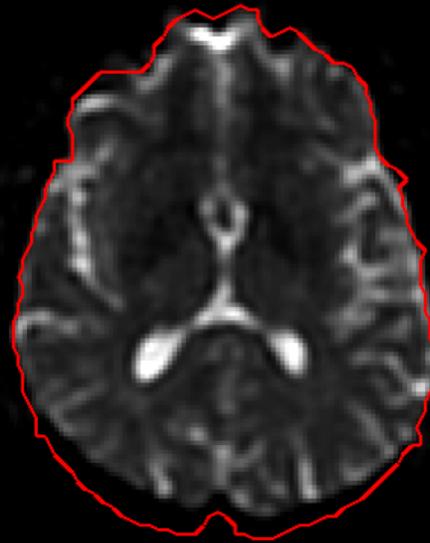


SSEPI

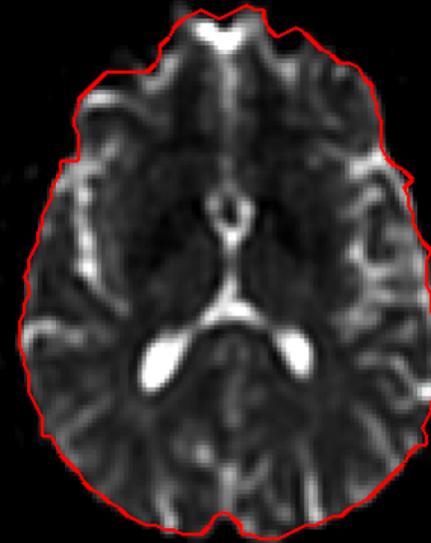
# CON: Distortions from field inhomogeneities



T2-weighted  
FSE

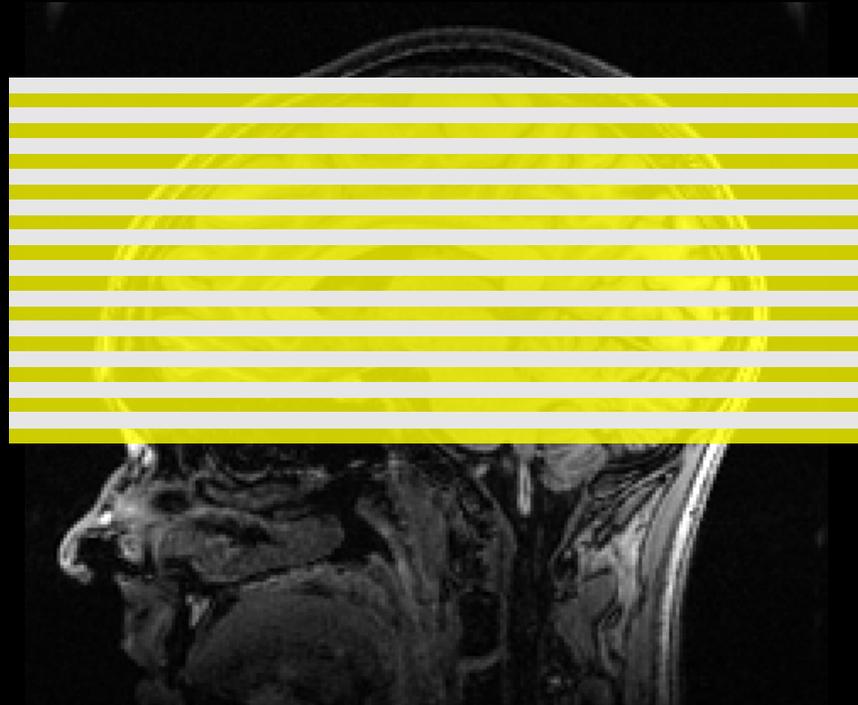


SSEPI

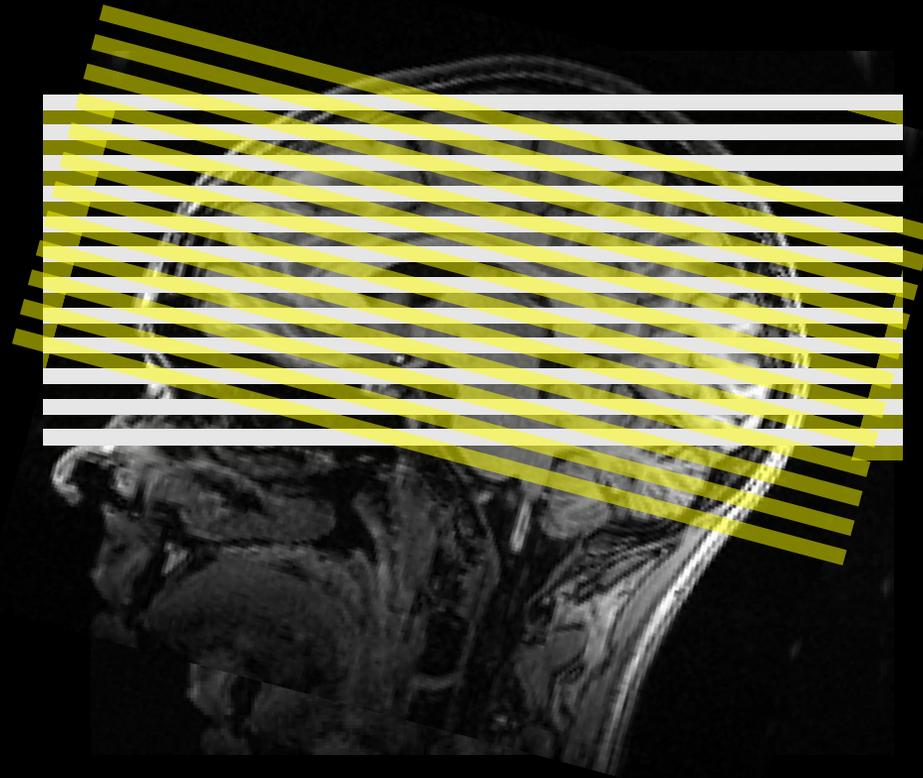


SSEPI  
corrected

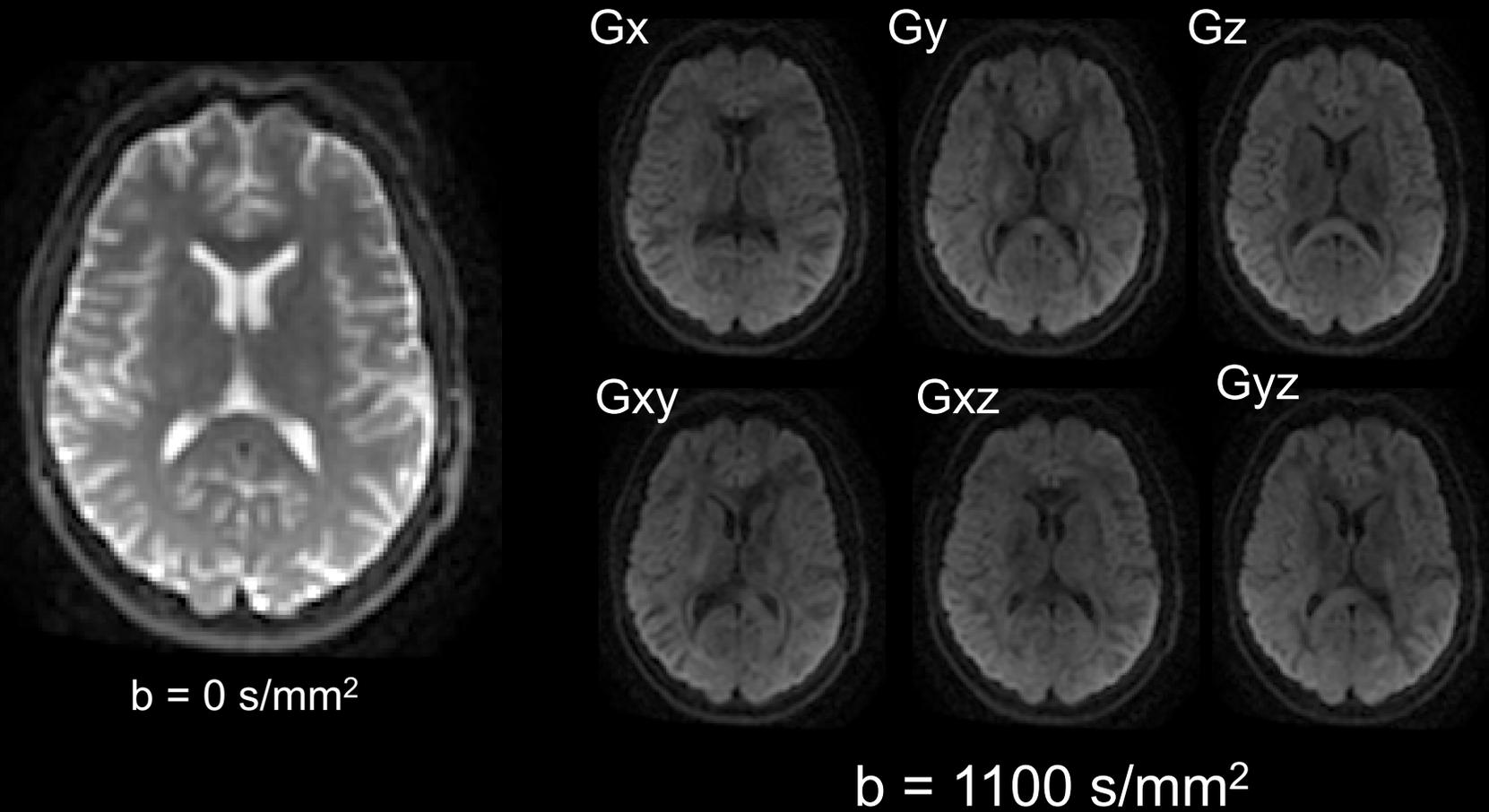
# Interleaved Slice Acquisition



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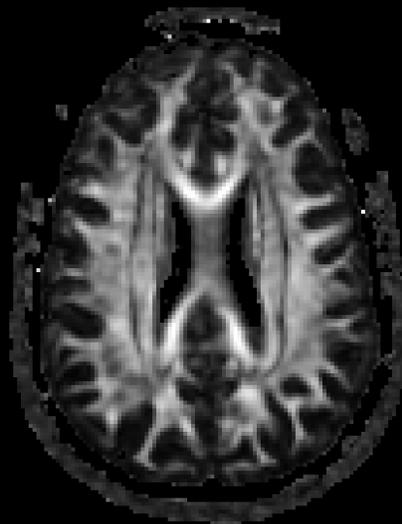


# DTI

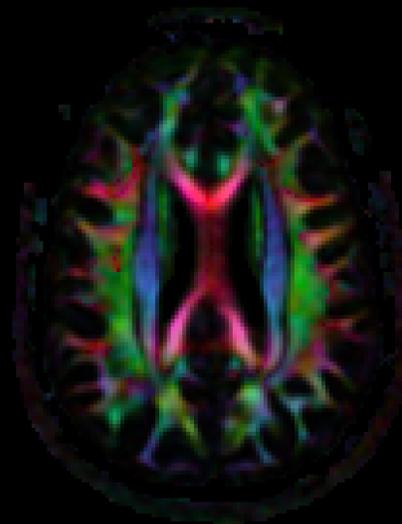




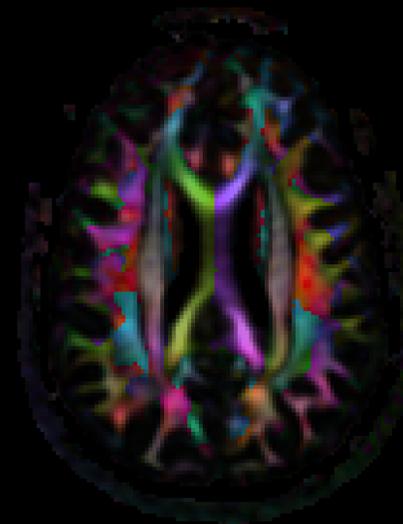
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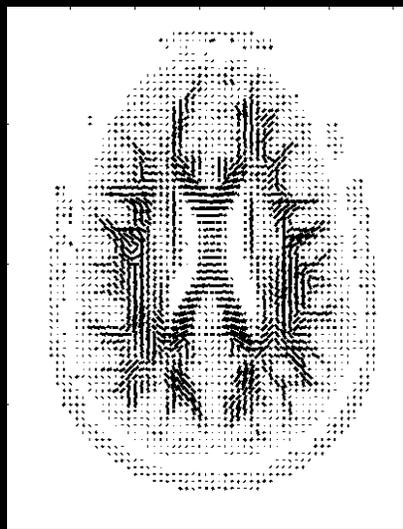
FA



DEC



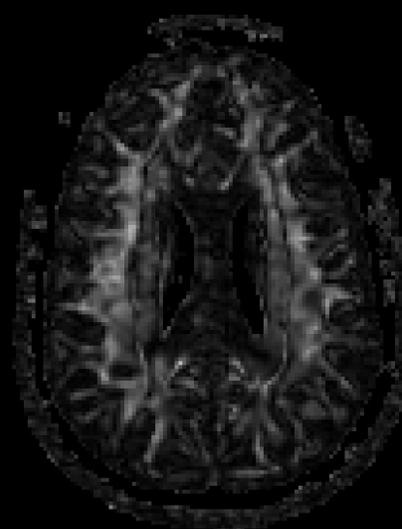
No sym DEC



Line Field



Linear



Planar



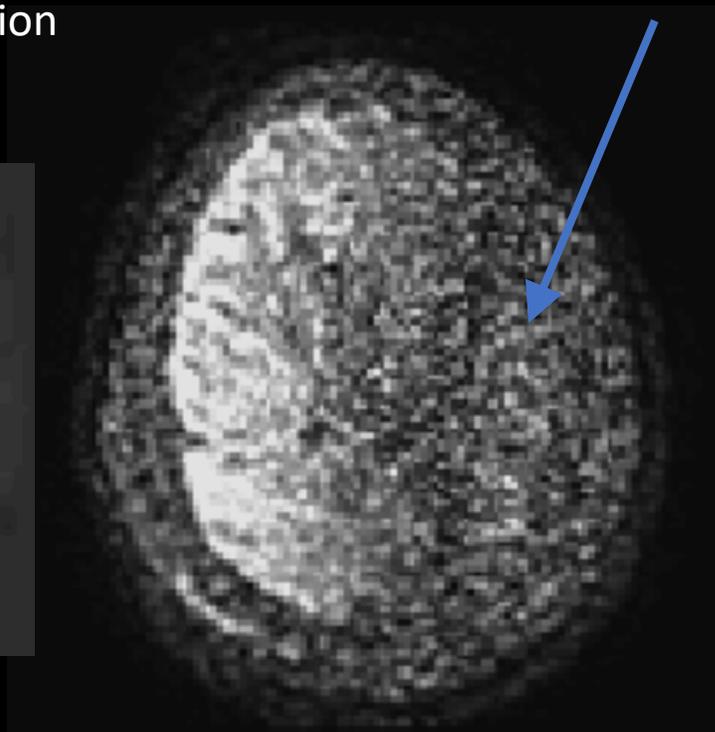
Spherical

# What does motion look like?

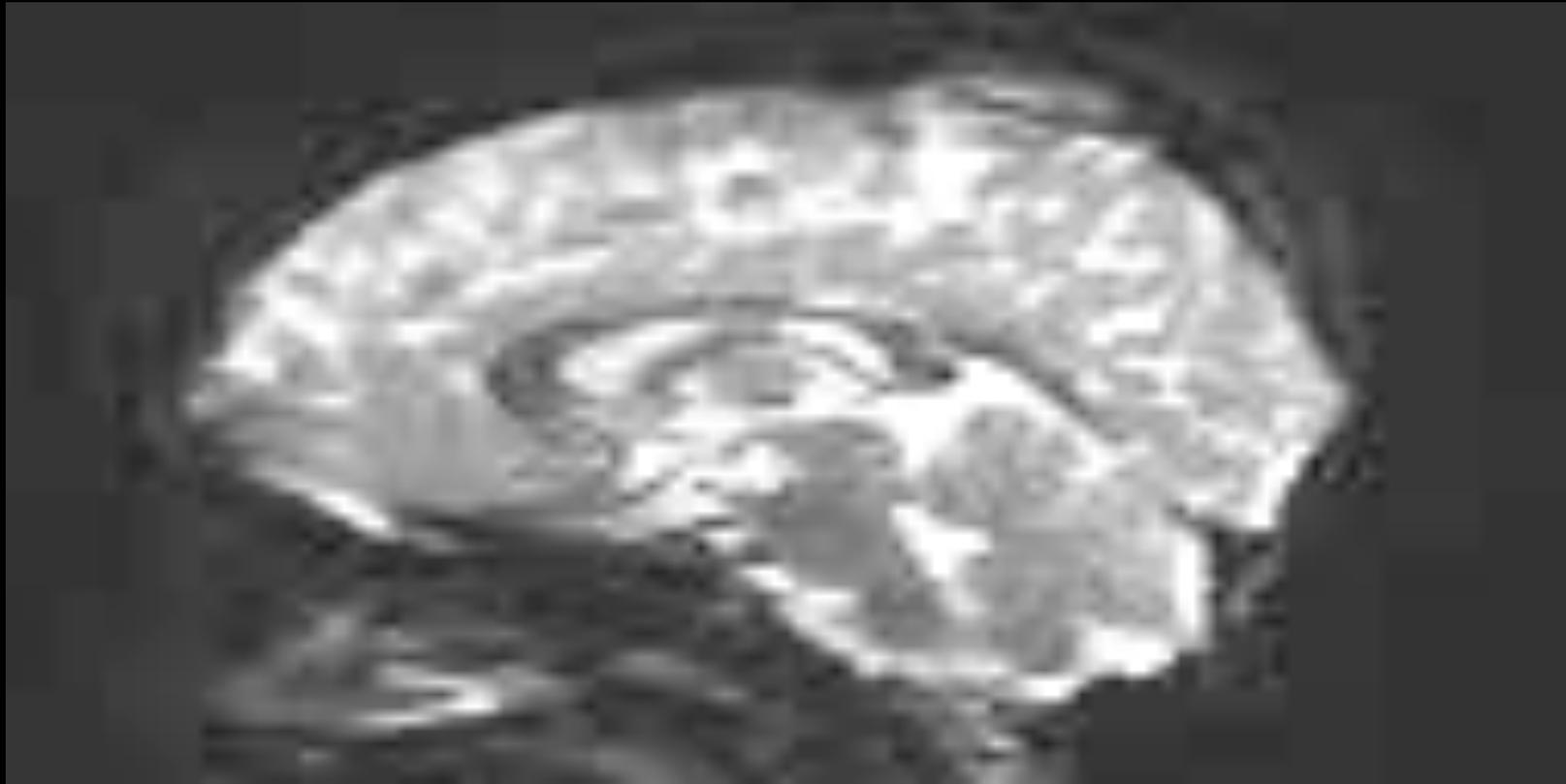
Intra-volume  
Slice mis-registration



Signal Loss



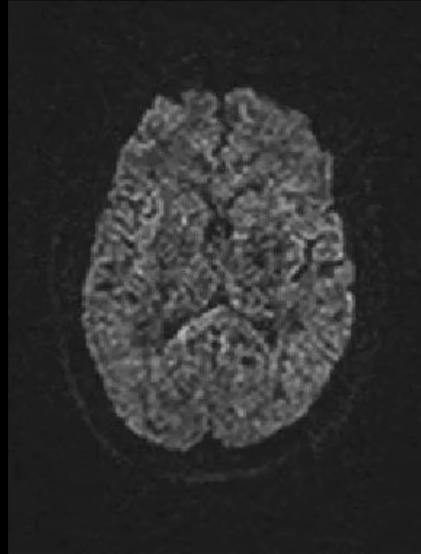
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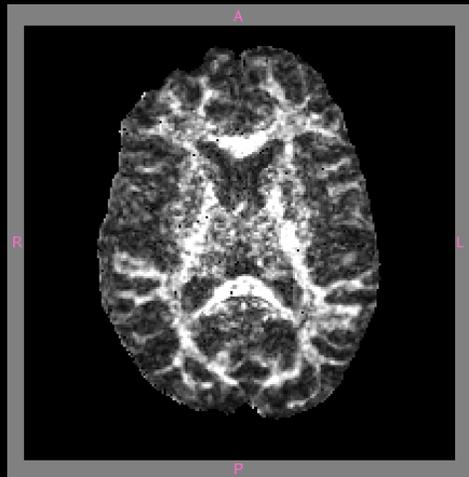
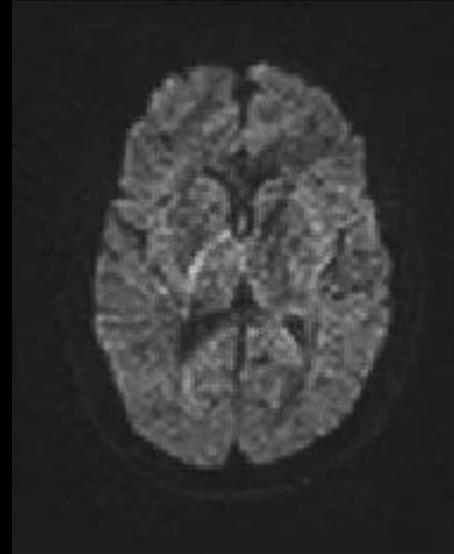
# Motion Correction Techniques

- Retrospective Motion Correction
  - Image volume registration
  - Image volume elimination
- Necessary part of any diffusion MRI processing pipeline

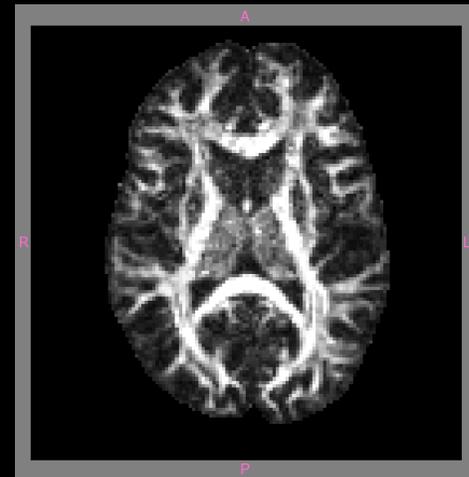
# CON: Distortions from DW



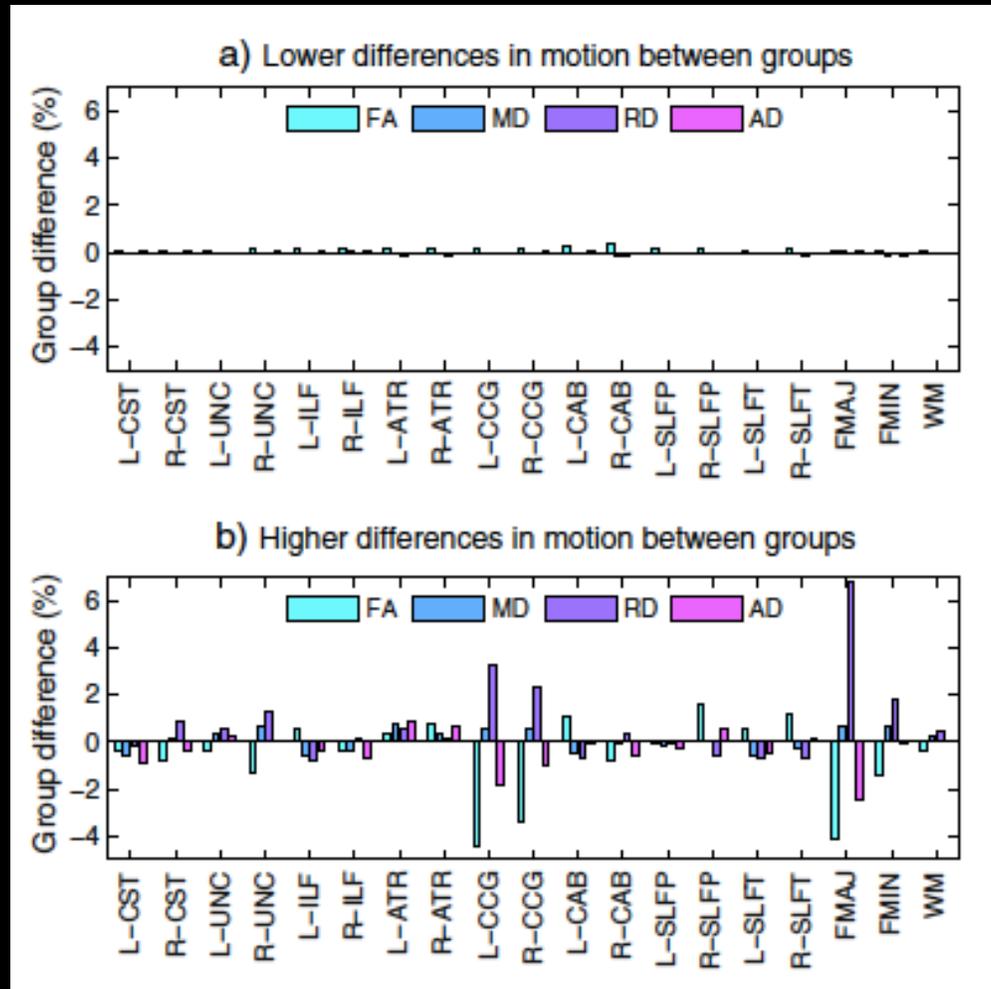
DW  
SSEPI  
volumes



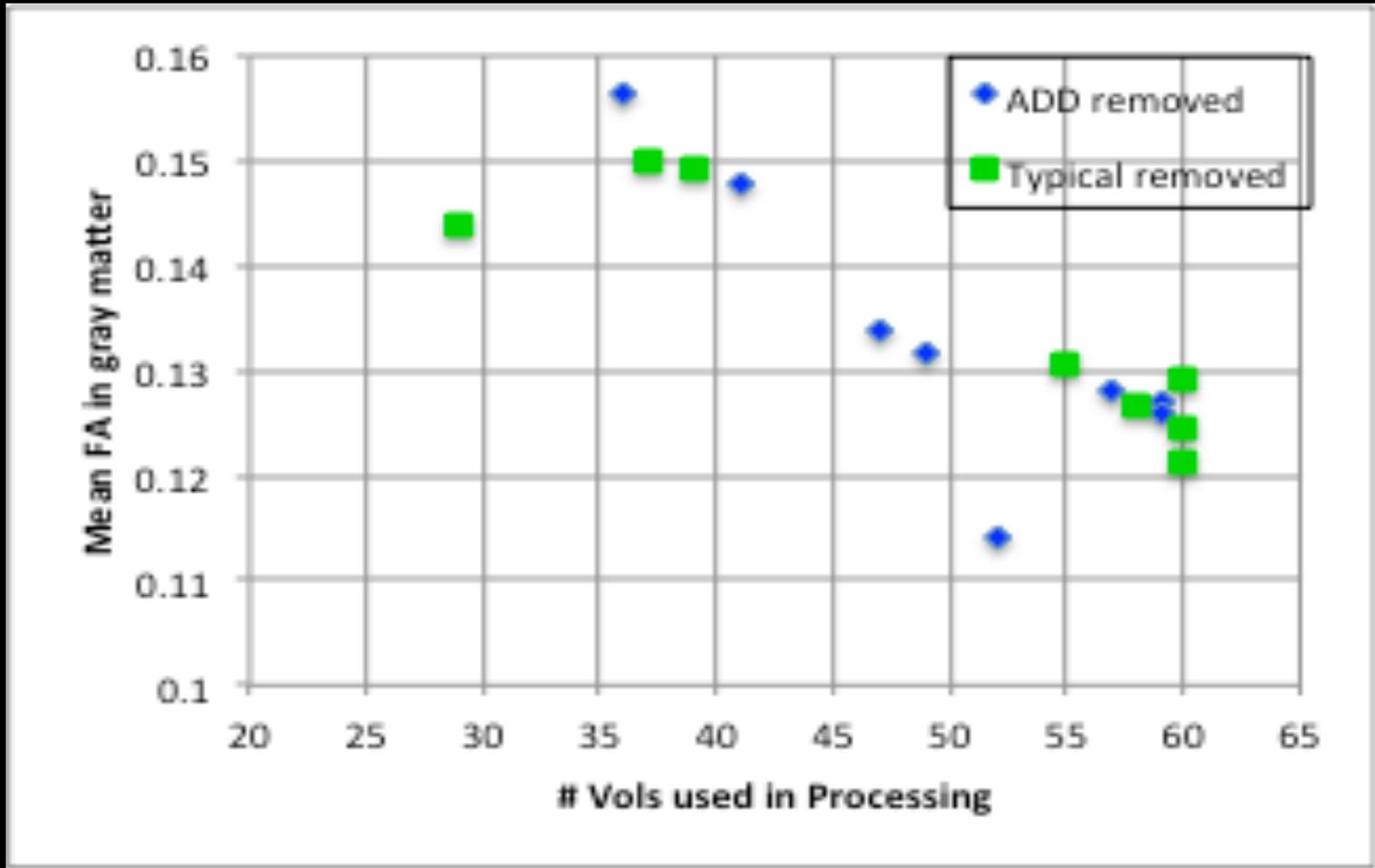
FA maps

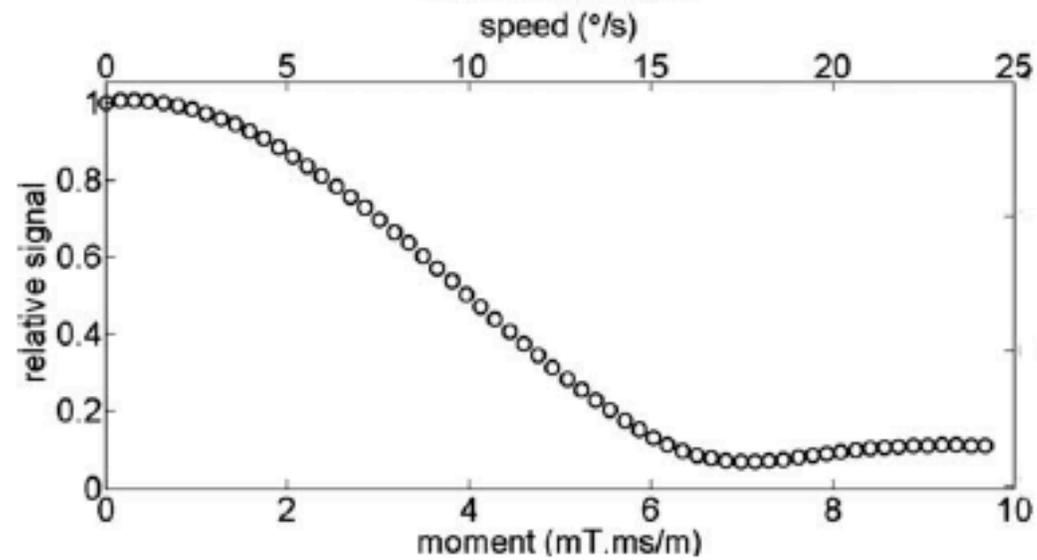
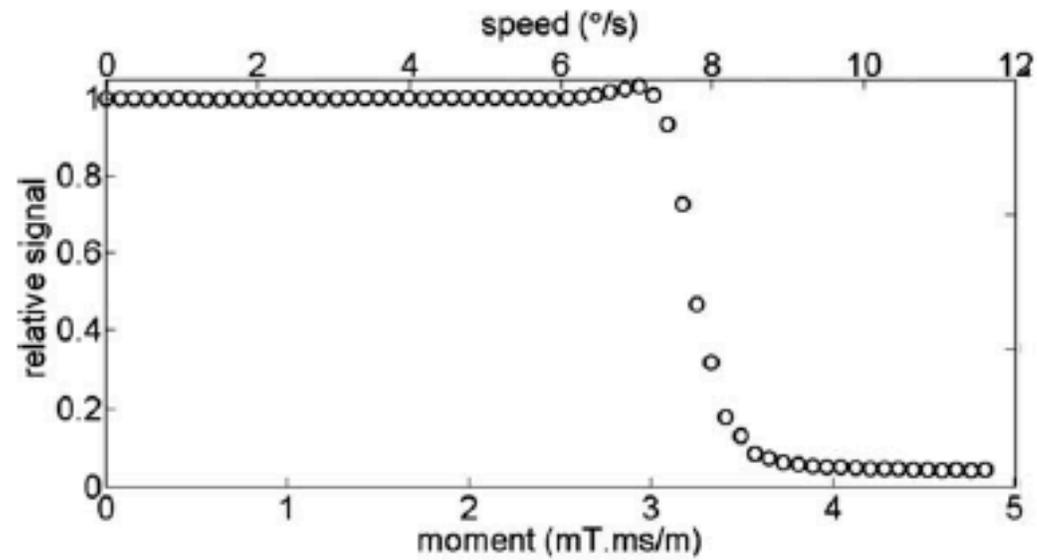


# How does motion impact results?



### Bias induced after standard QC

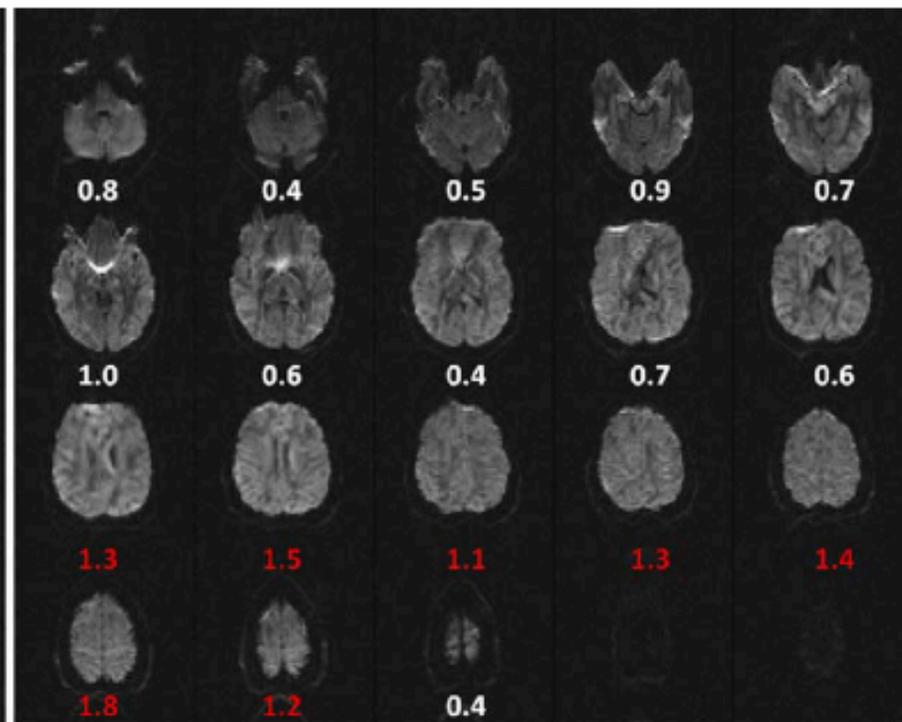
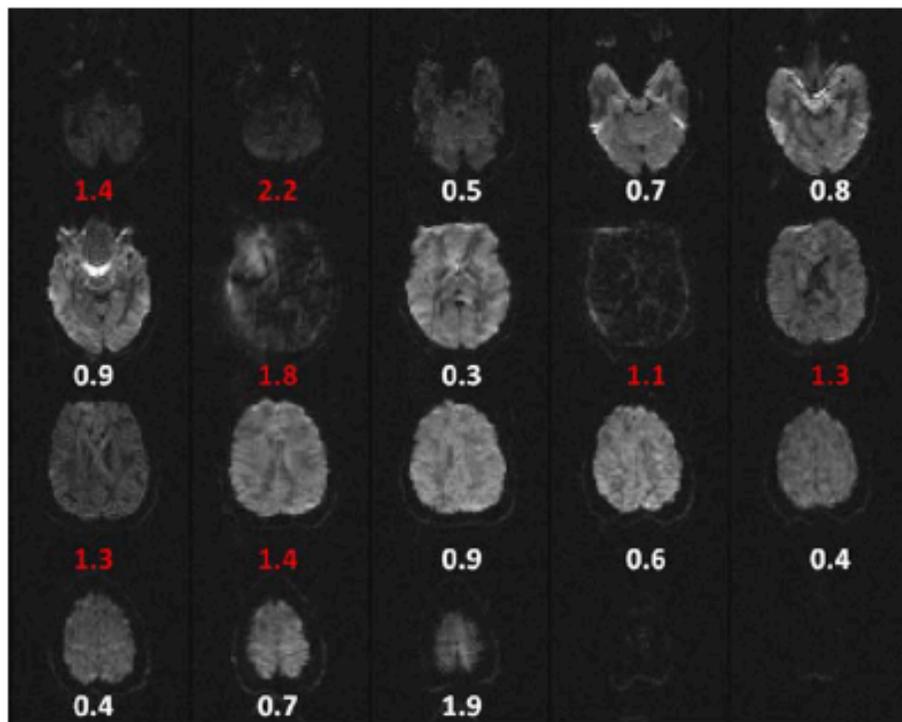




# Motion Correction Techniques

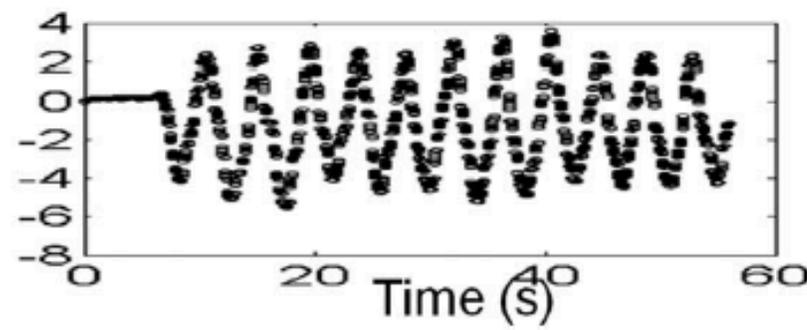
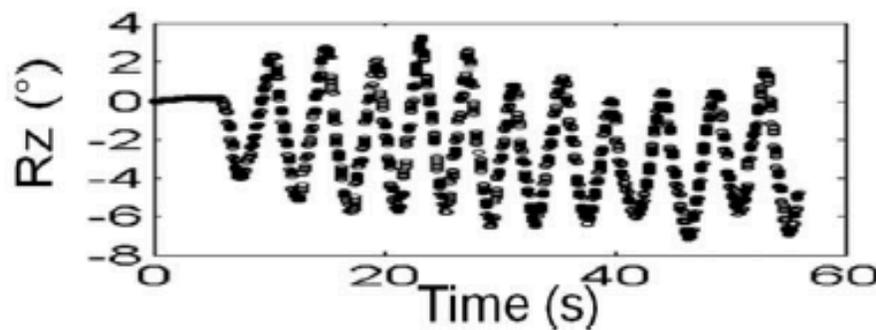
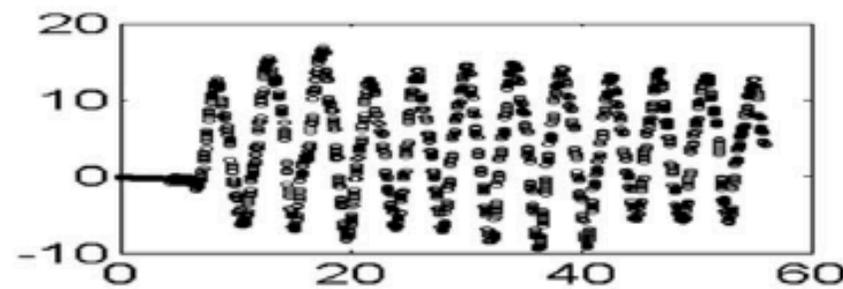
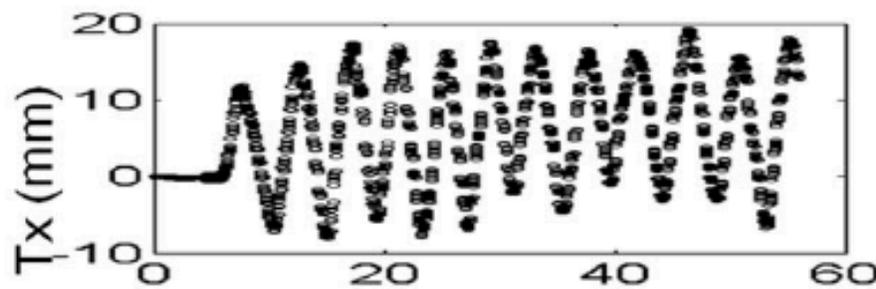
- Retrospective Motion Correction
  - Image volume registration
  - Image volume elimination
- Physically Restricting
  - Headcase
- Prospective Motion Correction
  - ~~■ MRI Navigators~~
  - Optical tracking

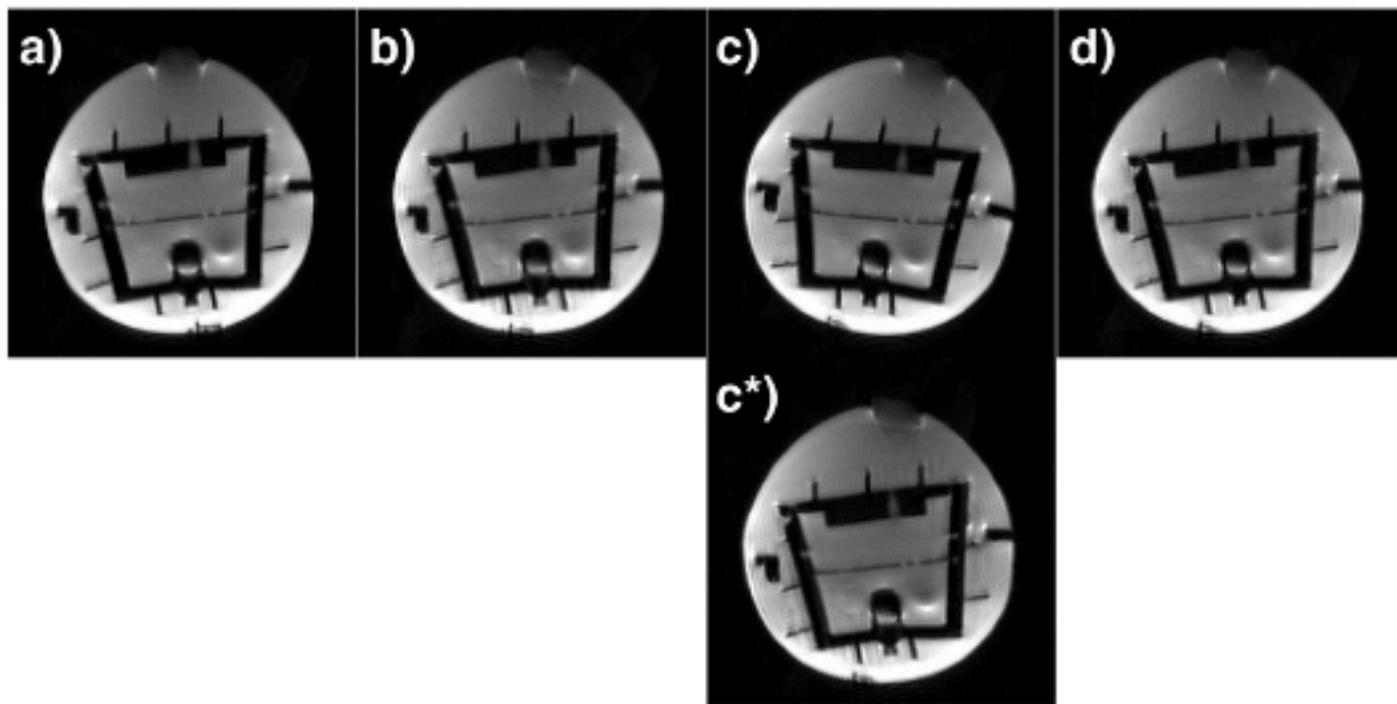
Pro



(2014)

Pre  
Dif  
Res  
Kazi  
Lind  
Max





**Fig. 1.** A single slice of a DWI experiment at 4 time-points (no diffusion weighting). Phantom (a) in the original position, (b) after manual movement, updating the imaging volume using external tracking. The air-bubble on the top indicates the change in orientation. (c) A shift in marker position introduces an error term to the correction matrix. (c\*) The PACE algorithm detects and corrects for this error term. (d) The measured marker displacement is taken into account during subsequent position updates, and the image shows good agreement with the original position shown in panel (a).

# Summary

- Motion does effect extracted parameters
  - Increased variance
  - Introduce bias
- Bias may correlate with the amount of motion
  - Induce false results as motion can vary between study groups
- Removal of motion corrupted data does not alleviate these effects
  - Does not remove correlation (structural)
  - May induce bias (DTI)
- A “toolbox” of techniques is needed to compensate for motion in research imaging (Zaitsev et. al. J Magn Reson Img 2015; 42:887-901)



# ACKNOWLEDGEMENTS

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Jennifer Evans, NIMH

Dan Rettmann, GE Healthcare

Ajit Shankaranarayanan, GE Healthcare

Andre van der Kouwe, MGH

Martin Reuter, MGH

M. Dylan Tisdall, MGH

Contact Joelle Sarlls ([sarllsjo@mail.nih.gov](mailto:sarllsjo@mail.nih.gov)) with questions/comments!

THANK YOU

# fMRI Imaging

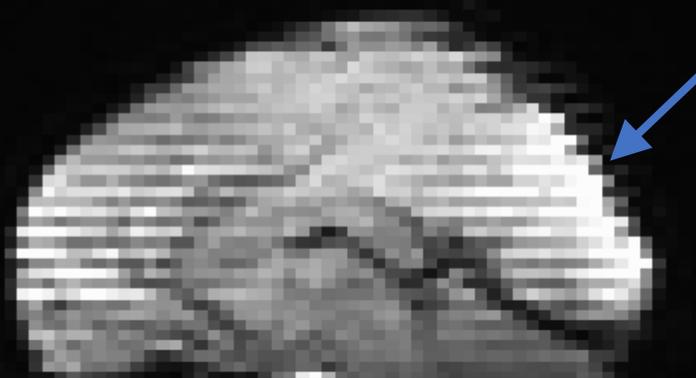
## Why is motion a problem?

- fMRI utilizes the BOLD signal
  - Measured as change in intensity
  - Typically on the order of a few%
- Multiple volumes required
  - Long scan times

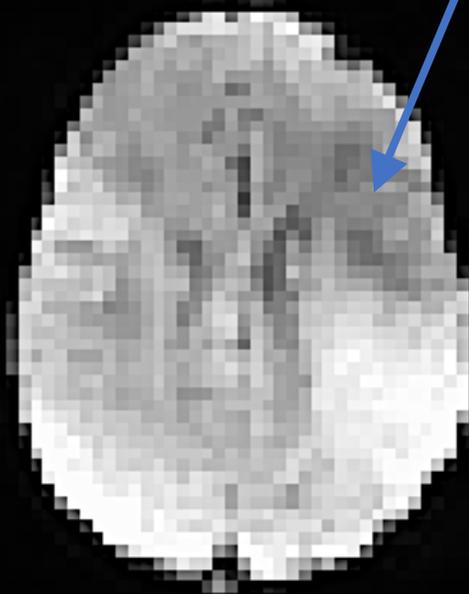


# What does motion look like?

Intra-volume  
Slice mis-registration



Signal Loss



What does motion look like?



# How does motion impact results?

